

URBAN/MUNICIPAL

CAB ON HW058

98 H32

**The Hamilton-Wentworth
Community Action Program for Children (CAPC) Project:
Evaluation Report of the
COMMUNITY SUPPORT WORKER PROGRAM**

Social Planning & Research Council

SPRC
of Hamilton-Wentworth

255 West Avenue North, Hamilton, Ontario L8L 5C8
tel: (905) 522-1148 • fax: (905) 522-9124 • t.d.d. (905) 522-0434



A United Way Agency



The Hamilton-Wentworth
Community Action Program for Children (CAPC) Project:
Evaluation Report of the
COMMUNITY SUPPORT WORKER PROGRAM

January 1998

Prepared by:

Marilyn Swinton
CAPC Evaluation Co-ordinator


From May 01 1994 - March 31 1997
(First Three Years of CAPC Funding)



Production of this document has been made possible by a financial contribution from the Community Action Program for Children, Health Canada, in co-operation with the Province of Ontario and the Social Planning and Research Council of Hamilton-Wentworth.

The views expressed herein do not necessarily represent the official policy of Health Canada.

SOCIAL PLANNING AND RESEARCH COUNCIL OF HAMILTON-WENTWORTH
255 West Avenue, North, Hamilton, ON L8L 5C8



Digitized by the Internet Archive
in 2023 with funding from
Hamilton Public Library

ACKNOWLEDGEMENTS

Production of this document has been made possible by a financial contribution from the Community Action Program for Children and Health Canada, in co-operation with the Province of Ontario and the Social Planning and Research Council of Hamilton-Wentworth.

The Hamilton-Wentworth CAPC is a collaborative community effort of the following agencies: The Regional Community Services Department, The Regional Public Health Department, St. Joseph's Community Health Centre, the Skills Through Activity and Recreation (STAR) Program, and the Social Planning and Research Council of Hamilton-Wentworth.

The views expressed herein are solely those of the author and/or the Community Action Program for Children Evaluation Committee and do not necessarily represent the official policy of the Social Planning and Research Council of Hamilton-Wentworth, Health Canada or the Province of Ontario.

Members of the Hamilton-Wentworth CAPC Evaluation Committee need to be acknowledged for providing their expertise, guidance and support throughout the process of data collection and analysis: Dianne Busser, Jo-Anne Case, Sharon Charters, Wendy Kowalski, Myrna Leaman, Mary O'Connor, Elaine Saunders, Helen Thomas, Colleen Van Berkel, and Fiona Yeudall.

Acknowledgements are also made to the staff at the Community Support Worker Program who worked with the author to collect the data: Jo-Anne Case, Peggy Lilliman, and Nora Lindman.

Acknowledgements need to be made to Bonnie Kernaghan who transcribed the qualitative data from the focus groups and interviews, and to Pat Miladin who formatted the qualitative data from the evaluation forms.

The following staff from the Social Planning and Research Council of Hamilton-Wentworth are acknowledged for their much appreciated feedback (Don Jaffray), and for their administrative assistance in preparing the final report: Tammy Saunders and Sally Quider. Also to be acknowledged for administrative assistance is Judy Kloosterman of the CAPC office.

On additional acknowledgement needs to be made, and that is to Heather Rex, who interviewed program participants and wrote the vignettes which appear in this report, based on data from the qualitative interviews.

TABLE OF CONTENTS

ACKNOWLEDGEMENTS

EXECUTIVE SUMMARY	iii
1.0 INTRODUCTION	1
2.0 HISTORY OF THE CAPC PROJECT	2
2.1 History of the Community Support Worker Program	3
3.0 AN OVERVIEW OF THE PROGRAM	4
4.0 EVALUATION OF THE PROGRAM	8
4.1 Program Development Form	8
4.2 Demographic Information Form	8
4.3 Written Participant Evaluation Form	8
4.4 Written Service Provider Evaluation Form	8
4.5 Attendance Form	9
4.6 Participant Focus Groups	9
4.7 Qualitative Interview with Program Participants	9
4.8 Long-term Follow-up Quantitative Interview	9
5.0 COMPONENTS OF THE PROGRAM	10
5.1 Home Visiting Components	10
5.2 Community Drop-ins	10
5.3 Lifeskills Group	11
5.4 Ready, Set, Go	11
5.5 Parenting Escape Hatch I	11
5.6 Parenting Escape Hatch II	11
5.7 Crafter's Collective	12
6.0 ATTENDANCE	13
6.1 Program Attendance by Groups/Services	13
6.2 Attendance Broken Down By Number Of Services	14
7.0 THE CAPC CATCHMENT AREA	15
7.1 Risk Indicators in the CAPC Catchment Area	15
7.1.1 Income Levels	16
7.1.2 Social Assistance Rates	16
7.1.3 Additional Risk Indicators	17
8.0 DEMOGRAPHICS OF PROGRAM PARTICIPANTS	18
8.1 Limitations of Demographic Data	18
8.2 Demographic Highlights	19
8.3 Interpretation	20
8.3.1 The Community Support Worker is Serving a Population "At-Risk"	21
8.4 Gender	22
8.5 Family Composition	22
8.6 Age	22
8.7 Languages Spoken in the Home	23

The Hamilton-Wentworth Community Action Program for Children (CAPC) Project:
Evaluation Report of the Community Support Worker Program

8.8 Gross Household Income	24
8.9 Education Levels	25
8.10 Employment Status	25
8.11 Number of Children Under Six	26
8.12 Catchment Area Statistics	26
9.0 PROGRAM PROCESS DATA	27
9.1 Developmental Stages	27
9.2 Lessons Learned	28
9.3 Changes Made	32
10.0 Data From Program Participants	33
10.1 Why Participants Take Part in the Community Support Worker Program	33
10.2 Did It Help Them With Parenting?	34
10.3 How They Rate the Program	34
10.4 Indicators of Positive Early Child Development	35
11.0 VIGNETTES FROM THE QUALITATIVE INTERVIEWS	37
11.1 Participant A	37
11.2 Participant B	37
12.0 PARTICIPANT COMMENTS ABOUT PROGRAM STAFF	38
13.0 PROGRAM OBJECTIVES, INDICATORS AND OUTCOMES	39
14.0 RECOMMENDATIONS FOR FUTURE PLANNING AND EVALUATION	40
15.0 CONCLUSIONS	41
16.0 REFERENCES	42

APPENDICES

- Appendix One: Program Development Form
- Appendix Two: Demographic Information Form
- Appendix Three: Written Participant Evaluation Form
- Appendix Four: Written Service Provider Evaluation Form
- Appendix Five: Attendance Form
- Appendix Six: Questions for Focus Groups
- Appendix Seven: Questions for Qualitative Interviews
- Appendix Eight: Long Term Follow-Up Interview: Form E
- Appendix Nine: Map of the CAPC Catchment Area

EXECUTIVE SUMMARY

The Hamilton-Wentworth CAPC Project:

A collaborative effort of five community agencies (The Regional Community Services Department, The Regional Public Health Department, St. Joseph's Community Health Centre, The Skills Through Activity and Recreation Program [STAR] and The Social Planning and Research Council of Hamilton-Wentworth), the CAPC project provides six programs for families "at-risk" who reside in East Hamilton and Stoney Creek.

The goals of the CAPC project are three-fold: to improve prenatal and infant nutrition, to make parenting easier and to reduce the potential for child abuse and neglect (through community empowerment).

The Community Support Worker (CSW) Program:

A new initiative of the CAPC project, the CSW program assists parents to: (i) develop skills and support networks to manage the difficulties with raising children on a limited income, (ii) develop goals related to vocational/educational pursuits and, (iii) develop knowledge to promote their child's development and strengthen family life.

The program offers many different components for participants, ranging from home visiting to open community drop-ins to closed parenting groups and pre-employment groups. Program participants direct their involvement by identifying their need(s), their service choice (group and/or home visits), and their level of involvement. Participants have shared responsibility for implementing all aspects of their plan. This participant-driven approach promotes knowledge, life skills and empowers the participants to improve the quality of their lives.

Attendance:	Number Served: 506
Demographics:	Number Who Completed Demographic Information Forms: 94 (19%)
Gender:	96% are female
Marital Status:	55% are single parents
Participant Age:	average female participant age is 29.5 years

Number of Children

Under Six:	37% have two or more children under six living in the home
Language:	4% do not speak English as their first language in the home
Household Income:	70% - 77% live below the Low-Income Cut-Off (LICO) used by Statistics Canada for measuring poverty
Education:	39% have not completed high school 23% have completed high school 33% have some post-secondary education
Employment Status:	70% are not working outside the home

Reasons Why Participants Attend the CSW Program

Assistance with Parenting: *"to learn new techniques for parenting and to network with other parents who may be able to help with parenting issues"*

Assistance with Returning to Work/School: *"knowledge on where to get back to school and course to start into"*

For A Break: *"to get me out of the house"*

Social Aspects: *"to interact with other parents of small children"*

Assistance with Coping: *"I need to deal with life. Things."*

How 37% of the Participants Rated the Community Support Worker Program

(a pictorial scale)

Hats Off	49%
Thumbs Up	40%
So So	2%
Thumbs Down	0%
Blah	0%
Not Answered	9%

Comment Made by a Participant During An Interview:

"...everyday I use the information on agencies, how to contact people and organize things, everything fell into place when I wanted to apply for college, I had to apply for OSAP and switch my daughter's daycare and then fill out the applications for college, appropriate steps. Now I'm in college whereas a year before I wasn't doing anything. My child will benefit because I will get a job so I can support her. The program makes me not want to quit things whereas before I could get very frustrated...I've sent four of my friends to the program and now they are achieving their goals. I tell everybody about it because its great. You come a long way from that program. Its the best program I've seen so far. They are not bias because you're a welfare care. [Staff] are nice to the point to call and see how I'm doing, follow-ups which other agencies never do."

Conclusions

Based on the data collected from April 01 1994 - March 31 1997, the Community Support Worker Program is serving its target population of families "at-risk" living in East Hamilton/Stoney Creek.

While the quantitative data is in the final stage of being collected and thus is not included in this report, the qualitative data collected indicate that the program is achieving its goals related to (i) increased parental self-esteem, (ii) increased knowledge and use of community resources by participants, and (iii) improved parenting and household skills in program participants.

It is clear through the qualitative data collected that the unique ecological approach of the Community Support Worker Program is highly valued by the program participants, and may be viewed itself as one of the program's successes.

Numerous important lessons have been learned by the program staff in delivering the different components of the program to families "at-risk". These have been incorporated into programming as they have been learned. The program has gone beyond its stated goals centred around parental skill development to include opportunities for peer support among its participants and the Monitoring opportunity which trains graduate participants to become a parent facilitator.

"...everyday I use the information on agencies, how to contact people and organize things, everything fell into place when I wanted to apply for college, I had to apply for OSAP and switch my daughter's daycare and then fill out the applications for college, appropriate steps. Now I'm in college whereas a year before I wasn't doing anything. My child will benefit because I will get a job so I can support her. The program makes me not want to quit things whereas before I could get very frustrated...I've sent four of my friends to the program and now they are achieving their goals. I tell everybody about it because its great. You come a long way from that program. Its the best program I've seen so far. They are not bias because you're on assistance whereas other programs have the attitude that you're a welfare case. [Staff] are nice to the point to call and see how I'm doing, follow-ups which other agencies never do."

Comment made by a Community Support Worker Participant During a qualitative interview.

1.0 INTRODUCTION

This report summarizes evaluation findings from the Community Support Worker Program for the first three years it received CAPC funding from Health Canada (May 01 1994 - March 31 1997).

This report is one of a series of eight evaluation reports written on the Hamilton-Wentworth CAPC Project. These other reports, which include reports on the other CAPC programs and a report on the overall project are available through the Social Planning and Research Council of Hamilton-Wentworth.

The Community Support Worker (CSW) Program is one of six programs under the umbrella of the Hamilton-Wentworth CAPC project which works with families 'at-risk' to improve the health of children aged zero (prenatal) to six years. Families 'at-risk' include families who are living on limited incomes and/or experience social isolation. The goals of the CAPC project are three-fold: to improve prenatal and infant nutrition, to make parenting easier, and to reduce the potential for child abuse and neglect (through community empowerment).

A new initiative of the CAPC project, the CSW program assists parents to: (i) develop skills and support networks to manage the difficulties associated with raising children on a limited income, (ii) develop goals related to vocational/educational pursuits and, (iii) develop knowledge to promote their child's development and strengthen family life.

Community Support Workers use results from their functional assessments to design individualized programming for the participant. Program participants direct their involvement by identifying their need(s), their service choice (group and/or home visits), and their level of involvement. Participants have shared responsibility for implementing all aspects of their plan. This participant-driven approach promotes knowledge, life skills and empowers the participants to improve the quality of their lives.

Delivered in the CAPC catchment area, the CSW program interacts and collaborates with a broad range of services, providing individualized interventions in the home of program participants, ongoing community drop-ins, and structured group sessions.

The program also offers participants a monitoring opportunity where graduate participants are trained to provide child care and/or act as group facilitators.

2.0 HISTORY OF THE CAPC PROJECT

The CAPC funding in Hamilton-Wentworth is the successful result of a proposal submitted to Health Canada. The proposal was a collaborative effort of the following five community agencies: The Regional Community Services Department, The Regional Public Health Department, St. Joseph's Community Health Centre, The Skills Through Activity and Recreation Program (STAR) and The Social Planning and Research Council of Hamilton-Wentworth.

Health Canada granted the project 1.5 million dollars for a three year pilot (April 01 1994 - March 31 1997). This money was used to develop a CAPC infra-structure and fund the seven programs that were outlined in the original proposal. Three of these programs were existing programs (Baby's Best Start, Nobody's Perfect and STAR), which received enhanced funding to deliver more services in the CAPC catchment area. Four of the programs were new initiatives (Community Access to Child Health [CATCH], the Community Support Worker Program, the Parents Helping Parents Program and the Student Parent Resource Area/Young Parent Program), designed specifically to work with families "at-risk" living in East Hamilton and Stoney Creek. A portion of the money was committed to evaluating the programs and the project.

In addition to the funding from Health Canada, the five partner agencies of the CAPC project have contributed significant amounts of professional time, program resources and office space which are essential to the success of the project.

In March 1997, the Hamilton-Wentworth CAPC Project received confirmation from Health Canada that it was successful in the renewal process, and full funding was secured for an additional three years (April 01 1997 - March 31 2000).

TABLE 2.1: HISTORY OF THE COMMUNITY SUPPORT WORKER PROGRAM

Dates	Key Events
May 1994 - August 1994	<ul style="list-style-type: none"> ● funding received from Health Canada ● 2 professional staff hired as Community Support Workers
September 1994 - December 1994	<ul style="list-style-type: none"> ● developed 8 community sites for servicing participants in open educational/support groups ● developed a closed pre-employment group called Ready, Set, Go ● waiting list existed for individual home visiting component and group sites
January 1995 - December 1995	<ul style="list-style-type: none"> ● increased community sites to 12 ● piloted the Ready, Set, Go group ● trained an Employment Counsellor to co-facilitate the Ready, Set, Go group ● developed and facilitated budgeting workshops to assist parents in handling the 21.6% reduction in social assistance payments
January 1996 - December 1996	<ul style="list-style-type: none"> ● program expanded from serving sole support parents to include two parent families ● increase in the number of referrals from the Children's Aid Society ● four participants trained as facilitators and child care providers ● developed 3 new groups: <ul style="list-style-type: none"> -> Parenting Escape Hatch I (child development and child-rearing group) -> Parenting Escape Hatch II (activities and toys to promote child development) -> Stepping Forward (life skill group for moms at a womens' shelter)
January 1997 - March 1997	<ul style="list-style-type: none"> ● 5 active volunteers trained as group facilitators and child care providers ● Parent Escape Hatch I and II Manuals developed based on group and facilitator feedback

3.0 AN OVERVIEW OF THE COMMUNITY SUPPORT WORKER PROGRAM

The information in this overview comes from evaluation forms completed as part of the National CAPC Evaluation. The headings and descriptions are pre-determined on the form, and are not written by program staff. When completing these forms, program staff are required to check off which options in a question best reflect the nature of the program.

Program Components:

- home visiting
- child care enrichment
- family/parent focused programs
- service network focused programs
- career focused groups - skill identification & development, self-esteem enhancement, community resources & planning for school/work

Problems/issues The Program Addresses:

- parenting skills
- community linkages/support
- money management/budgeting
- household safety/housing/household management
- self-esteem

Benefits To Children Expected To Result From Program Activities:

- improved cognitive function, including language development and school preparedness
- improved physical health
- fewer risks to the child during infancy or later including injury experiences
- children are referred to programs/community supports (i.e. day care, improved access of parents to services that impact/improve a child's development)
- assist parents in the development of a healthy, stable environment, which leads to reduced parental/family stress

Benefits To Parents Expected To Result From Program Activities:

- improved caretaking skills
- higher levels of social support including opportunities for socialization
- increased coping resources, including improved sense of well-being, self-esteem & sense of control
- higher standard of living noted by increased income, improved housing, employment
- strengthened family functioning

Benefits To Neighbourhoods Or Communities Expected From Program Activities:

- positive impact of parent involvement in community development

Benefits To The Service Delivery Network:

- higher levels of integration, co-ordination
- increased availability and accessibility of services
- improved quality of service

The Community Support Worker Program Serves:

- parents with young children
- parents who need training in child care, management or supervision
- one parent families
- families with few material resources evidenced by low income, over crowded or inadequate housing, shortages of food or clothing
- families referred by the existing service system (e.g. public health, child welfare services, children's mental health etc.) as needing special help or support
- children who need supplemental care or opportunities for learning, socialization or skill development
- families who are highly mobile or transient

Key Objectives Of The Community Support Worker Program:

- to increase capacity of parents to relate positively by enhancing their self-esteem; parenting skills; communication; and coping skills
- to improve life skills & household management skills
- to increase parent's knowledge and use of appropriate community resources and services
- to increase the likelihood of the parent establishing goals and planning and meeting career objectives

Major Activities/content Of The Community Support Worker Program:

- set up, assess and facilitate sessions with each parent in their home regarding parenting skills; household management, coping skills & accessing community supports
- set up & facilitate education/support sessions on coping skills, self-esteem, parenting, budgeting, household safety.
- vocational planning - group sessions & linkages to community services and agencies to develop and implement instructional, interactive teaching tools

Community Support Worker Programming Occurs At:

- homes of program participants
- high school
- parent-child drop-in centres
- day care centres
- community health centre
- community agencies provide space & referrals for participants (e.g. alternative education programs)

Agencies, Organizations, & Groups That Contribute To Delivery Of The Program:

- Social Planning and Research Council
- CAPC Program Co-ordinator, committees & staff
- Hamilton-Wentworth Community Services Division
- Wilma's Place - Cathedral High School
- Kiwanis Parent-Child Drop-In
- Red Hill Family Centre
- Roxborough Parent-Child Drop-In
- Churchill High School
- Queenston Parent-Child Drop-In
- St. John's Parent-Child Drop-In
- St. Joseph's Community Health Centre
- Department of Public Health Services
- Regional Employment Services
- Wentworth County Board of Education (Social Workers)
- Hamilton Housing
- Regional Social Services: Community Team & Sole Support Team
- Interval House

- Marty Karl Centre for Personal Development

Roles Available For Consumers In Delivering The Community Support Worker Program:

- a volunteer role for identifying and enlisting participants
- a volunteer role in providing services
- a volunteer role on a CAPC committee
- a volunteer role as a child care provider
- participation in training for a group facilitator

Roles Available For Consumers In The Governing Of The Community Support Worker Program:

- informal opportunities to express their views and opinions about the program
- formal opportunities to express their views and opinions about the program (interviews, surveys, focus groups)
- membership in working groups and on planning committees that make recommendations for running the program to the steering committee, however, they do not have control over decisions made about the program

4.0 EVALUATION OF THE COMMUNITY SUPPORT WORKER PROGRAM

This report summarizes the evaluation findings for the Community Support Worker Program as part of the CAPC project. The Hamilton-Wentworth CAPC Project is evaluated at three different levels: the national level, the regional level (which is the province of Ontario) and the local level.

The local evaluation plan was developed to incorporate the required components of the national and regional evaluations in addition to components which the evaluation committee determined were important for the local level.

A brief description of the components of the Community Support Worker Program evaluation follows:

4.1 Program Development Form (Appendix One)

- developed for the national evaluation
- collects information on the stages of development of the program, the lessons learned in terms of development and management of the program as well as changes made to the program

4.2 Demographic Information Form (Appendix Two)

- collects demographic information on program participants and asks them why they come to the CAPC program

4.3 Written Participant Evaluation Form (Appendix Three)

- completed by participants at the end of a closed group session or periodically at open drop-in sessions
- asks participants what was most helpful about the program, what was least helpful about the program, what they are doing differently as a result of the program, if the program has helped them with parenting and if so, how, and how they would rate the program

4.4 Written Service Provider Evaluation Form (Appendix Four)

- completed by the service provider(s) for the program at the end of each session
- asks the service provider(s) to describe the issues participants talked about, to describe the dynamics of the group and recommendations for future programming

4.5 Attendance Form (Appendix Five)

- collects information on the number of participants who attend program sessions

4.6 Participant Focus Groups (Appendix Six)

- participants are brought together in a group to find out how they found out about the program, the opportunities they have to provide input into the program, what changes they would like to see, if (how) the program is helping them and how they have used the information gained from the program to benefit themselves, their child(ren) and their community
- three focus groups were held with participants from the Community Support Worker Program: one with seven individual clients, one with eleven group participants and one with eleven participants from the Ready, Set, Go course

4.7 Qualitative Interviews With Program Participants (Appendix Seven)

- completed on a small sample of CAPC participants to gain an in-depth perspective of the stresses in their lives, how they cope with those stresses and the impact the CAPC program is having on them
- four participants from the Community Support Worker program were included in the interview sample

4.8 Long-term Follow-up Quantitative Interviews: Form E (Appendix Eight)

- this interview was developed for the national evaluation to assess the impact of CAPC on participants over time
- this interview collects information on the participant's physical and mental health, their child's development, family functioning and the neighbourhood the family lives in
- these interviews are completed soon after the participant first joins the program (baseline), 9 months after the baseline and twenty-four months after the baseline
- 15 participants from the Hamilton-Wentworth CAPC project (1 from the CSW program) are being interviewed as part of the national evaluation, an additional 32 CAPC participants (11 from the CSW program) are being interviewed for the local evaluation
- the 24 month follow-up interviews for the local evaluation will be completed in February 1998, at which point the data will be analysed and a report written
- when the national data is available from Statistics Canada, the local sample will be statistically combined to produce a larger sample size for Hamilton-Wentworth which will allow for comparisons at the provincial and national levels

5.0 COMPONENTS OF THE COMMUNITY SUPPORT WORKER PROGRAM

Modelled on the region's successful Home Management Program, the CSW program specifically targets parents with children aged zero (prenatal) to six. The two Community Support Workers have over twenty years of experience working with individuals, families, and the community at large. Along with their related degrees, they have completed additional training which include courses such as the Life Skills Coaching Course and the Empowering Ourselves Certificate Course. The program staff have developed strong relationships with other service agencies in the community directly through the sharing of resources, knowledge and expertise, and indirectly, through referral and case management activities.

The CSW Program offers a number of different services which range from individual home visits to community drop-ins and open groups, to closed parenting and pre-employment groups, to community collectives. The descriptions below summarize the key components of the program.

5.1 Home Visiting Component

- participants are visited individually in their homes by a Community Support Worker
- the service is family-oriented (it involves the entire family and significant others)
- content of the home visits varies with each individual case, but the following issues are emphasized: goal setting, behaviour management, a strong counsellor-family relationship, positive role modelling and active reinforcement of the parent role, education, child abuse prevention and early intervention, and creating and strengthening supportive systems for families using an ecological approach
- home visits typically last for 1.5 -2.5 hours and occur weekly, bi-weekly or monthly depending upon the family's need and movement towards self- reliance
- duration of involvement with the family varies from 4 to 12 months

5.2 Community Drop-ins

- occur weekly at Roxborough Park & Kiwanis Parent Child Drop-In
- occur monthly at St. John's and Queenston
- each session ranges from 1.5 - 2.0 hours
- are not offered in July and August
- content is varied, including guest speakers, topics suggested by participants and topics used in the Lifeskills/Parenting Groups

5.3 Lifeskills Group

- these groups are offered as a need is identified by participants or service agencies
- groups are typically offered once a week over 6-8 weeks
- content is focused on developing specific practical skills used in daily living (e.g. budgeting, nutrition, problem solving)
- topics are presented through group discussion, demonstration, role-play, reading and videos

5.4 Ready, Set, go

- this course is offered twice a week over 6-8 weeks based on need identified by participants or service agencies
- this is a skill development course for participants who are interested in returning to school, job training or looking for work
- various topics related to employment and school are discussed by group members (e.g. barriers/fears/concerns people encounter when returning to work or school and ways to overcome them, self-esteem, interview skills)
- given that this is a skill development program, there is no expectation that participants return to school or work, however, telephone follow-up with participants indicates that 36% of those who attended the course have returned to either school or work

5.5 Parenting Escape Hatch I

- this eight week course is offered once a week and is facilitated by a Community Support Worker and a Parent Co-Facilitator
- based on the philosophy that people are their own expert, this course provides an opportunity for parents to discuss parenting with other parents, both providing and receiving support from their peers
- objectives of the course include: (i) enhanced self-confidence and positive feelings of self-esteem (ii) gained insights on child development (iii) exposure to different perspectives/approaches on parenting

5.6 Parenting Escape Hatch II

- this eight week course is offered once a week and is facilitated by a Community Support Worker and a Parent Co-facilitator
- based on the need of participants in Parenting Escape Hatch I, this course was developed to provide parents with an opportunity to learn, make and experience developmental toys/activities for use with their children

- participants make toys and activities that are stimulating, educational, age appropriate and fun
- participants learn how to use these toys and activities to promote child development

5.7 Crafter's Collective

- offered in partnership with the Community Access to Child Health (CATCH) program, this collective provides an opportunity for women to come together and make crafts, socialize and share the financial profits made from selling the crafts
- the collective meets for two hours once a week at the CAPC office

6.0 ATTENDANCE

Since participants often participate in more than one service, another table will illustrate how many participants use one service, how many use two services, etc., and also the total number of different participants in the program. The Total Number of Different Participants Served: 506

6.1 Program Attendance By Groups/service

For each group or service, a participant is only counted the once, the first time they attend a group or participate in a service. The numbers are not totalled in the table because participants often attend more than one service (e.g. a participant who receives home visits may also have participated in Ready Set, Go)

TABLE 6.1: ATTENDANCE

PROGRAM COMPONENT	Number of Participants Who Attended
Individual Home Visits	158
Billy Green School Parents Group	7
CAPC Community Crafters Collective	6
Friday Craft Group	11
Kiwanis Parent-Child Drop-In	63
Queenston Drop-In	35
Roxborough Drop-In	18
St. John's Drop-In	22
Red Hill Parents Group	46
Sir Winston Churchill High School Parents Group	32
Stepping Forward at Interval House	32
Wilma's Place	20
Lifeskills Group	16
Parenting Escape Hatch 1	29
Parenting Escape Hatch 2	12
Ready, Set, Go	39

6.2 Attendance Broken Down By Number Of Services

TABLE 6.2: ATTENDANCE BROKEN DOWN

Number of Services	Number of Participants (N=506)
One service	466
Two services	17
Three services	13
Four services	3
Five services	4
Six services	3

7.0 THE CAPC CATCHMENT AREA

The CAPC catchment area encompasses East Hamilton and the town of Stoney Creek. This geographic area was chosen because it is an underserved area of the region where a high concentration of high risk families reside. Needs assessments of both residents and agencies/churches/organizations within the area indicate that large numbers of the population are disadvantaged. Furthermore, residents of this area do not have local access to many of the services, resources and facilities enjoyed by residents of other areas in the Hamilton-Wentworth region. The CAPC catchment area has the following boundaries (see map, appendix).

- West Boundary: Strathearne Avenue & Cochrane Road
- East Boundary: Fifty Road
- North Boundary: Lake Ontario
- South Boundary: the brow of the escarpment

7.1 Risk Indicators In The CAPC Catchment Area

At the time of writing the CAPC proposal, the following risk indicators were identified in the catchment area through reviewing Regional Community Services records, conducting focus groups with residents and agency representatives, interviewing priests/ministers of churches, and reviewing census tract data:

- high levels of unemployment
- high levels of poverty and related undernutrition
- poor parenting skills among many isolated, disadvantaged families
- escalated frequency of violence including child abuse
- lack of locally accessible formal and informal resources (health, social, recreational, and cultural)
- high rates of low income families
- high rates of single parent families
- low literacy rates

A recent Risk and Capacity Profile of Hamilton-Wentworth (Henry, 1997) revealed that Hamilton is at a significantly higher risk for poverty and social assistance compared to both the provincial and the country. A brief description of these risks follows:

7.1.1 Income Levels

In terms of income levels, the City of Hamilton and the town of Stoney Creek are the two poorest areas within the region of Hamilton-Wentworth. The City of Hamilton has an average income which is below both the Canadian and Ontario averages. Henry (1997), reports, using 1991 data from Statistics Canada, the following figures:

7.1 INCOME LEVELS

Geographic Area	Poverty Rate (number of families earning < \$20 000)
Canada	16.8%
Ontario	13.1%
City of Hamilton	17.4%
Town of Stoney Creek	8.8%

The academic research literature has consistently shown that poverty correlates with more negative outcomes for children than any other single factor. In his "Risk and Capacity Profile of Hamilton-Wentworth", Henry lists the following outcomes as being associated with child poverty:

- higher infant mortality, low birth-weight babies and chronic health problems
- reduced opportunities for developing a secure attachment to a caregiver in infancy
- a higher risk of being abused
- an increased likelihood that the child will make use of physical aggression in relating to others
- a greater risk for emotional and psychological problems
- a greater risk for suicide
- less opportunity to develop social skills
- poor school performance

7.1.2 Social Assistance Rates

Social assistance rates are often used an indicator of poverty in a city or region. Henry (1997), reports that in 1995, 14.9% of the population in the Hamilton-Wentworth region (the region includes Hamilton, Stoney Creek, Flamborough, Glanbrook, Ancaster and Dundas) were receiving social assistance. This is higher than the total social assistance

rate for Ontario in 1995. In more detail, in 1995, more than 45,000 people in Hamilton-Wentworth were receiving General Welfare Assistance (GWA) and more than 45,000 people were in receipt of the Family Benefits Allowance (FBA).

Subtracting the social assistance rate for the region (14.9%) from the poverty rate for the region (17.4%) reveals that, in 1995, 2.5% of the population in Hamilton-Wentworth would be categorized as "working poor"

7.1.3 Additional Risk Indicators:

IMMIGRATION

Over 20% of residents in Hamilton-Wentworth identify a language other than English as their mother tongue (Henry, 1997). This is reflective of the presence of both long-term immigrants (e.g. Italian, Polish, Cambodian) and more recent immigrants from war-torn countries (e.g. Croatia, Slovenia, and Serbia). Past experiences of these immigrants combined with barriers such as language, racism, and cultural insensitivity result in a lack of access to traditional health and social services, and a higher risk for negative outcomes.

► The presence of these high risks in the region resulted in a recommendation in the Risk and Capacity Profile **"to increase investment in families with children younger than six who live in neighbourhoods with high rates of poverty and social service use, to prevent the need for further services."** This recommendation is in line with the work which the CAPC project is doing.

8.0 DEMOGRAPHICS OF PROGRAM PARTICIPANTS

8.1 Limitations Of The Demographic Data

It is important to note that the demographic data presented in this report was collected on 19% of the participants who attended services offered by the Community Support Worker Program.

There are several identified reasons for the low number of completed demographic information forms

- many of the services offered by the program do not use the demographic information form due to agency policy and the high risk, confidential nature of the agencies and groups (e.g. Womens' Shelters and teen educational groups held at homes for pregnant teens)
- participants who attend an open-drop in, such as St. John's or Queenston may not be asked to complete the form as it is not presented until after 3 sessions, and many do not attend 3 sessions and those that do may get missed due to the sporadic nature of attendance at drop-ins

In terms of the closed groups and individual home visit participants who are asked to complete the form, it is not known how many refused to complete the form, or how many were uncomfortable with completing the form due to literacy issues.

The demographic data which are presented, must therefore, be interpreted with caution as they represent less than one-quarter of the number of participants serviced through the Community Support Worker Program.

Another limitation results from the data being based on participant self-report. Self-reported data has the potential to be inaccurate due to lack of knowledge about some questions (i.e., accurate income levels) and/or fear of reporting all the facts (e.g. a person receiving social assistance may be fearful of reporting any additional income).

8.2 Demographic Highlights: Community Support Worker Participants

TOTAL NUMBER OF DIFFERENT PEOPLE SERVED: ► 506

(from May 01 1994 - March 31 1997)

- 94 (19%) of the participants completed a demographic information form
- demographic data is presented for both the program participant and their partner in order to provide more context to the data. Since partners do not attend the program, their data is not included in the demographic highlights

The following information is based on the 94 participants who completed the demographic form:

- 96% are female
- 55% are single parents
- average female participant age is 29.5 years
- 1% are teens (18 years or less)
- 28% have two or more children under 6 years living in their home
- 70% - 77% live below the Low-Income Cut-Off (LICO) used by Statistics Canada for determining poverty (the range is a result of asking for income ranges as opposed to actual incomes)
- 39% have not completed high school
- 23% have completed high school
- 33% have some post-secondary education
- 70% are not working outside the home
- 14% are working part-time
- 1% are working full-time
- 15% left this question blank
- 70% of these participants live in the CAPC catchment area

8.3 Interpretation Of The Demographic Data

As mentioned in the section on limitations of the demographic data (p 18), these data need to be interpreted with caution as they are based on only 19% of the participants who attended the program.

96% Are Female, 4% are Male

- since the program originally served only single parents, the high number of female participants is not surprising, given that the majority of single parent families are headed by females

55% Are Single Parents

- this finding is surprising given that the program initially served only single parents. This finding is likely the result of the small sample size, as well as the fact that demographic information forms were not introduced until one year after the program was running

Average Participant Age is 29.5 Years

- this finding was surprising given the high live birthrate of teens in Hamilton-Wentworth, as well as the high number of single parents aged 20 - 24 in receipt of social assistance. The problem of recruiting teen parents and young parents is one which is shared not only by the other CAPC programs in Hamilton-Wentworth, but by other CAPC projects in Ontario, indicating that the issue extends beyond the program

28% Have 2 or More Children Six or Under in the Home, 55% Have One Child Six or Under Living in the Home

- this finding is reflective of the population which CAPC serves, that is families with children aged zero (prenatal) to six years of age

70% - 77% Live Below the Low-Income Cut-Off

- this confirms that the program is serving families who are "at-risk". Poverty has more association with negative outcomes in children than any other single factor (see p 24)

39% Have Not Completed High School, for 23% High School is the Highest Education Level Attained

- this finding indicates a risk factor for program participants, as education is directly correlated with employment and income, both of which are necessary in order to provide for, and raise children

70% Do Not Work Outside the Home

- this finding is reflective of the low education level among participants (see above) and, is contributory to the low income level participants report (see above)

70% Live in the CAPC Catchment Area

- this indicates that the majority of program participants live in the targeted area of the program

8.3.1 The Community Support Worker Is Serving A Population "At-risk"

The demographic data collected reveal that the participants who take part in the Community Support Worker Program, as a group have the following risk indicators:

- moderate rate of single parents
- high poverty rate
- low education attainment
- high rate of unemployment

In addition to the high risk that poverty alone poses for the children living in the participants' families, research has demonstrated that risk factors multiply in effect as opposed to simply accumulating, which means that as the number of risk factors increases, so does the impact (Henry, 1997).

The high rate of poverty amongst program participants, coupled with the presence of other significant risk indicators confirms that the participants in the Community Support Worker Program belong to a population "at-risk".

8.4 Gender Breakdown Of Community Support Worker Program Participants

TABLE 8.1: GENDER (N=94)

Gender	Number of Participants
Female	90 (96%)
Male	4 (4%)
Total	94 (100%)

8.5 Family Composition Of Community Support Worker Program Participants

TABLE 8.2: FAMILY (N=94)

Family Composition	Number (%)
single parent family	52 (55%)
two parent family	39 (42%)
several relatives living together	3 (3%)
Total	94 (100%)

8.6 Age Breakdown Of Community Support Worker Program Participants And Their Partners

TABLE 8.3: AGE

Gender	Average Age	Range
Female Participants (n=90)	29.5 years	19 - 44 years
Male Participants (n=4)	34.3 years	30 - 44 years
Partners (n=44)	37 years	19 - 46 years

Number of Teen Participants (18 years of age or less): 1 (1%)

8.7 Languages Spoken In The Homes Of Community Support Worker Program

Participants

TABLE 8.4: LANGUAGE (N=94)

Language(s) Spoken	Number (%)
English	90 (90%)
English & Italian	1 (1%)
English & Spanish	1 (1%)
Khmer	1 (1%)
Laos	1 (1%)
Total	94 (100%)

8.8 Gross Household Income For Community Support Worker Program Participants

& Its Relation To Statistics Canada Low-income Cut-off (LICO)

The Most frequently used measure for determining poverty is the Statistics Canada Low-income Cut-Off (LICO). This has been identified as a consistent way of identifying those who are "substantially worse off than average." A family at or below a LICO is one which spends more than 55% of its income on food, shelter and clothing. The LICO measures relative poverty, that is, how people at the low income end are faring compared to those of "average" income (Campaign 2000). There are 35 LICOs for Canada which vary according to family size and community size. The LICO's used in this report are the 1996 LICOs from Statistics Canada for the city of Hamilton. LICOs for the town of Stoney Creek are slightly lower than those for Hamilton, for example, the LICO for a family of four living in Hamilton is \$27, 651, while the LICO for a family of four living in Stoney Creek is \$27,459 (Henry 1997)

TABLE 8.5: GROSS HOUSEHOLD INCOME FRO COMMUNITY SUPPORT WORKER PROGRAM PARTICIPANTS & ITS RELATION TO STATISTICS CANADA LOW-INCOME CUT-OFF (LICO)

Number in Family	1 (n=0)	2 (n=20)	3 (n=36)	4 (n=23)	5 (n=11)	6 (n=4)	Total (N=94)
INCOME RANGE							
< \$5 000	0	2	0	0	0	0	2 (2%)
\$ 5 000 - \$ 9 999	0	6	4	1	1	0	12 (13%)
\$10 000 - \$14 999	0	11	15	6	1	0	33 (35%)
\$15 000 - \$19 999	0	0	9	4	3	3	19 (20%)
\$20 000 - \$29 999	0	0	0	5	1	1	7 (7%)
\$30 000 - \$39 999	0	0	1	1	1	0	3 (3%)
\$40 000 - \$49 999	0	0	4	2	1	0	7 (7%)
Not Answered	0	1	3	4	3	0	11 (12%)
Stats Can LICO	\$14,694	\$18,367	\$22,844	\$27,651	\$30,695	\$34,168	
Number Below LICO	0	19	28	11 - 16	5 - 6	3	66 - 72 (70% - 77%)

8.9 Education Levels Of Community Support Worker Participants And Their Partners

TABLE 8.6: EDUCATION LEVELS OF COMMUNITY SUPPORT WORKER PARTICIPANTS AND THEIR PARTNERS

	Participants (N=94)	Partners (N=94)
no formal schooling	1 (1%)	1 (1%)
some elementary	1 (1%)	1 (1%)
completed elementary	3 (3%)	5 (5%)
some secondary	32 (34%)	9 (10%)
completed secondary	22 (23%)	7 (7%)
some community or technical college	8 (9%)	4 (4%)
completed community or technical college	17 (18%)	9 (10%)
some university	2 (2%)	4 (4%)
completed university or teacher's college	4 (4%)	2 (2%)
question not answered	4 (4%)	52 (55%)

8.10 Employment Status Of Community Support Worker Program Participants

TABLE 8.7: EMPLOYMENT STATUS OF COMMUNITY SUPPORT WORKER PROGRAM PARTICIPANTS (N=94)

	Participants N=94	Partners N=94
not working outside of the home	66 (70%)	8 (9%)
working part-time	13 (14%)	3 (3%)
working full-time	1 (1%)	25 (27%)
question not answered	14 (15%)	58 (62%)

8.11 Number Of Children 6 Years And Under Living In The Participants' Homes

TABLE 8.8: NUMBER OF CHILDREN 6 YEARS AND UNDER LIVING IN THE PARTICIPANTS' HOMES

Number of Children 6 years or under living in the home	Number of Participants: 94 (%)
no children (prenatal)	7 (7%)
one child	52 (55%)
two children	21 (28%)
three children	8 (9%)
question not answered	6 (6%)
total	94 (100%)

8.12 Catchment Area Statistics For Community Support Worker Program Participants

TABLE 8.9: CATCHMENT AREA STATISTICS FOR COMMUNITY SUPPORT WORKER PROGRAM PARTICIPANTS (N=94)

Live Inside CAPC Catchment Area	Live Outside CAPC Catchment Area	Did Not Provide an Address on Form D
70 (74%)	11 (12%)	13 (14%)

9.0 PROGRAM PROCESS DATA

9.1 Developmental Stages Of The Community Support Worker Program

TABLE 9.1: DEVELOPMENTAL STAGES OF THE COMMUNITY SUPPORT WORKER PROGRAM

	May 1994	Jan 1995	June 1995	Sept 1995	April 1996	Oct 1996
Planning for the program was complete; operational aspects of the program had been agreed upon; however activities had not yet begun	✓					
Planning for the program was complete; operational aspects of the program had been agreed upon; the program was running and individuals were participating - however the program was still not running at capacity and/or some issues need to be resolved about engaging participants, program content, etc.		✓				
Planning for the program and operational aspects of the program had been worked out; the program was running at or near capacity and major issues such as engaging participants, program content, etc. had been resolved.			✓	✓	✓	✓

9.2 Lessons Learned From The Community Support Worker Program

TABLE 9.2: LESSONS LEARNED

	June 1995	September 1995	April 1996	September 1996
DEVELOPMENT	<ul style="list-style-type: none"> ● learned how vitally important it is for participants to recognize their own capabilities and basic skills in vocational/career planning ● developed a statistical tracking system for length of involvement of each family in the home visiting component of the program ● started to develop a Family Needs Survey to identify needs and satisfaction of program involvement 	<ul style="list-style-type: none"> ● developed game "Time Management /Routines/ Schedules" as requested by participants at Interval House (Women's Shelter). ● participant input was used in the development of this group resource ● changes made to the Family Needs Survey to ensure the tool is user friendly 	<ul style="list-style-type: none"> ● CSW program will develop group sessions to increase parents knowledge around providing quality informal daycare ● will recruit volunteers to provide child care during groups 	<ul style="list-style-type: none"> ● Parenting Escape Hatch was developed in response to a need identified by participants for a closed parenting group ● group members chose titles and topics and provided input for the closed parenting group "Parenting Escape Hatch - Why Kids Don't Come With A How To Manual"

	June 1995	September 1995	April 1996	September 1996
DEVELOPMENT CONTINUED	<ul style="list-style-type: none"> ● referral pathways and links developed with employment related services, General Welfare Assistance, daycare subsidy and housing, all to reduce barriers for participants ● co-facilitated a pilot group for vocational planning, "Ready, Set, Go" with an employment councillor 	<ul style="list-style-type: none"> ● facilitated a community based group on budgeting to alleviate some of the participants' fears and frustrations resulting from the 21.6% reductions to social assistance payments ● reviewed and developed realistic budget goals with program participants prior to actual reductions ● referral pathways and linkages with Wentworth County Board of Education - met with social workers and principals 	<ul style="list-style-type: none"> ● to date, this program had served sole support parents only. The CAPC Steering Committee gave approval to start serving two parent families who have low-incomes ● increase in referrals from CAS, CCAS, and the broader community which has increased the number of home visits being done ● developed a centralized referral form to be used by other CAPC programs and the CAPC office 	<ul style="list-style-type: none"> ● new location and space of CAPC office allows for an increase in the CSW programs being offered ● staff will work flexible hours in order to be able to provide groups in the evening ● five parent volunteers are actively involved in developing the Parenting Escape Hatch course

	June 1995	September 1995	April 1996	September 1996
GOVERNANCE	<ul style="list-style-type: none"> ● it is important to continually actively seek and implement formal links in the community and with other CAPC programs - these actions benefit all involved 	<ul style="list-style-type: none"> ● it is important to involve clients in working committees to make CAPC programs more client driven 	<ul style="list-style-type: none"> ● empowering parents to take control requires a lot of time, guidance and support 	<ul style="list-style-type: none"> ● need to provide consistent support to volunteers ● volunteers included in professional development training and divisional team meetings

	June 1996	September 1995	April 1996	September 1996
OTHER	<ul style="list-style-type: none"> ● the personal approach is very important - encourages people to link, advocate for services in the community ● important to educate the community for success of programs and to gain their support ● family based programming is vital as parenting, life skills and social inclusion are interrelated ● group work and home visit approach are successful, it is difficult to meet the increased demand for service. The program attempts to balance these two services 	<ul style="list-style-type: none"> ● it is evident from the focus group with individual clients that this component of the program is successful ● developed many new effective community links: Employment Services, Student Parent Resource Area, Baby's Best Start, StJCHC, Mary Karl Centre for Personal Development and Hamilton Housing Authority 	<ul style="list-style-type: none"> ● Form C is time consuming for supervisor and staff to complete so the program developed a monthly stat sheet that breaks down all of the information required, making it easier to complete ● the staff's knowledge of the new legislation for FBA/GWA and Ontario Works is helpful to program participants 	<ul style="list-style-type: none"> ● groups need to be offered in the evenings to meet the needs of parents going to school or work ● need to actively recruit parent volunteers for sustainability and service need ● food vouchers and bus tickets are important for engaging participants in the program

9.3 Changes Made To The Community Support Worker Program

TABLE 9.3: CHANGES

June 1995	September 1995	April 1996	October 1996
<ul style="list-style-type: none"> ● referral pathways and links developed with Employment related services, General Welfare Assistance, day-care subsidy, and housing to reduce barriers for participants ● co-facilitated a pilot group for vocational planning "Ready, Set, Go" with an employment councillor 	<ul style="list-style-type: none"> ● facilitated a community based group on budgeting, able to alleviate some of the clients' fears and frustrations with the 21.6% cutbacks and current economic/life situations ● reviewed and developed realistic budget goals with program participants ahead of actual cutbacks ● referral pathways and linkages with Wentworth County Board of Education - met with Social Workers and Principals ● submissions into school newsletter for parenting groups and budgeting workshops 	<ul style="list-style-type: none"> ● to date, program has served sole support parents only. A need was identified among two parent low-income families. The CAPC Steering Committee gave approval to the program to start serving two parent families. ● based on a need identified by participants in the Ready, Set, Go program, a new program called Career Bridges is in the conceptualization stage - this program will incorporate topics identified by participants to meet the needs of parents to assist them in going back to school and/or looking for employment 	<ul style="list-style-type: none"> ● developed a team meeting format with the volunteers ● staff will work flex hours to provide groups in the evening ● five parent volunteers are actively involved in developing and implementing the Parenting Escape Hatch group ● parents provide child care to increase accessibility

10.0 DATA FROM PROGRAM PARTICIPANTS

10.1 Why Participants Take Part In The Community Support Worker Program

The demographic information form asks participants, "Why do you come to this program?" The following themes consistently emerged from the responses to the question. Italics indicate participants' words verbatim.

Assistance with Parenting Issues:

- *"to learn new techniques for parenting and to network with other parents who may be able to help with parenting issues"*
- *"to find out different ways to deal with children through tough times. Finding out what builds a child."*
- *"I come to this program to see what I can find out about learning more about children and how to handle situations when they arise".*

Assistance with Returning to Work/School:

- *"help me get ready to get a job and get job related skills"*
- *"knowledge on where to get back to school and courses to start into"*
- *"help with educational upgrading"*

For A Break:

- *"break from child"*
- *"to get me out of the house"*
- *"find it good for kids, it gets her out"*

Social Aspects:

- *"to interact with other parents of small children"*
- *"socialize with other parents, utilize other parents' knowledge"*
- *"to makes friends"*

Assistance with Coping:

- *"I need to deal with life. Things"*
- *"to deal with stress"*
- *"I come to this program for the much needed support and to get help coping with being a single parent"*

10.1.1 Summary Of Local Evaluation Forms

As part of the evaluation process, participants are asked (on an evaluation form) if they found the program helped them with parenting. They are also asked to rate the program on a pictorial scale (Hats Off, Thumbs Up, So So, Blah, Thumbs Down).

186 participant evaluation forms were completed. Due to the open nature of some components of the program, a participant may have completed an evaluation form more than once. The following data summarizes the responses found on the 186 forms, which represent 37% of the participants in the Community Support Worker Program.

10.2 Did The Community Support Worker Program Help You With Parenting?

TABLE 10.1: QUESTION 1

Response	Number (%)
Yes	152 (82%)
No	15 (8%) *
Question not answered	19 (10%)

* 5 of these responses were on the evaluation forms of Ready, Set, Go participants and Ready, Set, Go is not a parenting program

10.3 How Participants Rated The Community Support Worker Program

TABLE 10.2: ANSWER 1

Hats Off	Thumbs Up	So So	Thumbs Down	Blah	Question Not Answered
92 (49%)	74 (40%)	4 (2%)	0	0	16 (9%)

10.4 Indicators Of Positive Early Child Development

Many of the responses by participants to the questions, "What did you find most helpful about the program?", and "What are you doing differently as a result of your involvement in the program?" are indicative of known factors which influence positive early childhood development. These factors, along with participants responses (in italics) are summarized below:

Parent Support And Social Networks

- *"time spent with other parents - knowing they share similar experiences"*
- *"it has given me a place to bring my three children where I don't feel I am invading anyone"*
- *"gives me ideas on how to cope with small children and parenting"*

Nurturing Environments

- *"Including the kids in more. Try to relax more. Throw myself down and laugh."*
- *"concentrating on my childrens needs in every area of their life and using the information given to me personally for budgeting, organizing, etc."*
- *"I have more patience with my child and I have changed my needs and wants and appreciate more what I have"*

Adequate And Stable Family Finances

- *"budgeting and life skills"*
- *"managing my money better"*
- *"resources towards education and employment programs"*

Parenting Methods (use of consistent, nurturing behaviour & guidance)

- *"discussing how to best tell a child that a particular behaviour is not acceptable but the child is still loved"*
- *"I am working on consistent discipline not haphazard discipline"*
- *"by listening to my children more conflicts are greatly reduced"*

Family Functioning (parent/child, sibling, and community)

- *"I am looking at myself differently. Attitude wise, esteem wise"*
- *"I am now going to school and going somewhere in my future"*
- *"I handle discipline better. I handle bedtime better. More nutritional and feeding my family."*

Personal Development

- *"have self-esteem, listening to others more"*
- *"better management skills"*
- *"being more self-confident and understanding my limits"*

11.0 VIGNETTES BASED ON QUALITATIVE INTERVIEW DATA

11.1 Participant A

Participant A, an individual client who received home visits from a Community Support Worker, is a single mother with three young children and another child on the way. Because she cannot read or *"relate to a lot of things"*, she indicated that she requires specific assistance from her community support worker (and from other service providers with whom she interacts) to help her understand things.

This participant stated that she is glad that she is involved with the program because she is *"more happier"* and more involved with her children. When asked what she was doing more as a result of her involvement with the program, she stated, *"...I can relate to my kids and they understand me now more than before"*. She also mentioned that she is *"yelling"* less at her children.

11.2 Participant B

Participant B, a group participant of the Community Support Worker program, is a married, stay-at-home mother of two young children.

This participant recognized the importance of the skills taught in the Community Support Worker Program. *In some cases, because [the staff] teach life skills...they teach, ah, self-empowerment in a lot of cases, which can be really useful...to a single parent who needs just a little more confidence to get out there and get a job.*

Participant B referred to improvements in her household which she attributed to the program, *...through a couple of techniques that I've learned in group, I can...calm my house down during supper hour mostly, which is traditionally a really terrible hour...with the kids around, by supper time they're getting' cranky and they're tired, and then you've got my husband coming home from work, and it just generally ends up being a huge turmoil...[with the program] I've learned some techniques to distract the kids, rearrange priorities, so I'm not busy focusing on other things rather than my kids. And it makes it a lot quieter, all of it does.*

12.0 PARTICIPANT COMMENTS ABOUT STAFF

In addition to receiving support and friendship from other program participants, Community Support Worker participants receive support and enjoy the company of the staff. This is illustrated in the following quotes which were provided when participants were asked to describe the staff.

"I'll say that they're not professional in that they're not cold. They seem very interested in you personally and in what you're doing and where you're at, as opposed to finding out just enough to stick you in a category and then treat you as though you're a category instead of a person...They're not cold...They're more open, they're more friendly, they're more approachable, they don't set themselves up as being the expert...a lot easier to get along with."

"...they're professional...a very open door...and they're not intimidating either...I know some people who are very intimidating and...they don't make you feel that way at all."

"They're good. They're on the ball. They're human. They will help you...if I had a real bad problem, they will be there...I like CAPC program because they can stay and they will sit back and they'll talk to you...and if you were...like me, I was depressed a couple of months ago, and [staff] was there for me."

13.0 COMMUNITY SUPPORT WORKER PROGRAM: OBJECTIVES, INDICATORS AND OUTCOMES

Objective

Parents increase self-esteem and improve communications in interpersonal relationships.

TABLE 13.1:

Indicators	Outcomes
<ul style="list-style-type: none"> • section F on Form E Interview 	<ul style="list-style-type: none"> • data not analysed yet
<ul style="list-style-type: none"> • self-report by participants on local evaluation forms, during qualitative interviews and focus groups 	<ul style="list-style-type: none"> • parents report increased self-esteem and improved communication (p 42 -45)

Objective

Parents learn effective parenting skills and household management skills.

TABLE 13.2

Indicators	Outcomes
<ul style="list-style-type: none"> • Section D on Form E Interview 	<ul style="list-style-type: none"> • data not analysed yet
<ul style="list-style-type: none"> • self-report by participants on local evaluation forms, during qualitative interviews and focus groups 	<ul style="list-style-type: none"> • parents report using effective parenting and household management skills (p 42 - 45)

Objective

Parents have increased knowledge and use of community resources.

TABLE 13.3

Indicators	Outcomes
<ul style="list-style-type: none"> • Section C on Form E Interview 	<ul style="list-style-type: none"> • data is not analysed yet

14.0 RECOMMENDATIONS FOR FUTURE PLANNING AND EVALUATION

- ensure that program participants complete both the demographic information form and the evaluation form
- ensure that program staff implement the Family Needs Survey which was developed for the program but was not successfully implemented
- continue to follow-up with Ready, Set, Go participants
- conduct a chart review of charts for the home visiting component and develop a form to capture the important information (referral source, issues raised, duration of involvement etc.)
- ensure that when data on child health outcomes and parenting outcomes from the Form E interviews are available, they are considered when any program changes are proposed

15.0 CONCLUSIONS

Based on the data collected from April 01 1994 - March 31 1997, the Community Support Worker Program is serving its target population of families "at-risk" living in East Hamilton/Stoney Creek.

While the quantitative data is in the final stage of being collected and thus is not included in this report, the qualitative data collected indicate that the program is achieving its goals related to (i) increased parental self-esteem, (ii) increased knowledge and use of community resources by participants, and (iii) improved parenting and household skills in program participants.

It is clear through the qualitative data collected that the unique ecological approach of the Community Support Worker Program is highly valued by the program participants, and may be viewed itself as one of the program's successes.

Numerous important lessons have been learned by the program staff in delivering the different components of the program to families "at-risk". These have been incorporated into programming as they have been learned. The program has gone beyond its stated goals centred around parental skill development to include opportunities for peer support among its participants and the monitoring opportunity which trains graduate participants to become a parent facilitator.

16.0 REFERENCES

Campaign 2000 Report Card 1997: Child Poverty in Canada

Henry, Terrance (1997), Risk & Capacity Profile. Hamilton-Wentworth, A report prepared for the Hamilton Area Office of the Ministry of Community and Social Services.

**APPENDIX ONE
PROGRAM DEVELOPMENT FORM**

Community Action Program for Children

Appendix One: National Evaluation Program Development Form

Health Canada – protected when
completed
Aussi disponible en français

Form "C"

Activity Report at 6 Month Intervals

Cycle 5



Instructions for filling out this form can be found on the overleaf

In Form "C", PROJECT refers to the total intervention effort of your funded proposal. PROGRAM refers to those activities being undertaken to achieve particular objectives (e.g. improve parenting skills) with a particular group (e.g. primary caregivers). Some PROJECTS will have one PROGRAM. Other PROJECTS will have more than one PROGRAM.

The distinctive features of a PROGRAM are:

- ❖ objectives – what it is supposed to accomplish
- ❖ target population – whom the program is supposed to serve

One PROGRAM is different from another PROGRAM when one or more of these features is different between PROGRAMS.

THIS PROJECT IS IN THE FORM "E" SAMPLE

Project Number: 4927-06-93/0029

Language: E

Project Name: Community Action Program for Children
(CAPC): Hamilton-We

Province: ONTARIO

FED Number: 0529 FED Name: Hamilton East

Reporting Period: April 1, 1997 to September 30, 1997

For the Regional Program Consultant:

Check here and sign below after check list points on the overleaf have been verified. ☐

This form was verified by:

Name

Date

day month year

Signature

Regional Program Consultant to verify:

Form ☐ of ☐ for this project.

Check here if the project is no longer operating. ☐

Begin Here

Name of person completing Form "C":

Given Name

Family Name

Title of person completing Form "C"

Telephone number:

Area code - -

Fax number: (if applicable)

Area code - -

How to complete this form

To answer the questions:

Mark a circle



Print in a box

3

OR Print on a line

CAPC

Enter the name of each PROGRAM operating under this PROJECT, then answer the questions for each of the programs. (Use additional forms if there are more than three programs in the project.)

Note: The program names and numbers must be the same as reported on the "List of Programs in your Project".

Program Name: _____

Program Number:

--	--

What is this program's status?

- 1 ☐ Program has been active and operating for most or all of the past six months → Go to C2.
- 2 ☐ Program was not operating for most or all of the past six months, but has not been cancelled (e.g. seasonal, on hiatus until next session starts, offered on demand) → Go to C2.
- 3 ☐ Program is no longer in operation and is not expected to operate again → End date of program.

--	--	--	--

Go to C1

C1. The PROGRAM is no longer in operation because ...

Mark ALL that apply

- 1 ☐ program completed (objectives met)
- 2 ☐ federal funding reductions
- 3 ☐ provincial/territorial funding reductions
- 4 ☐ other funding reductions
- 5 ☐ program moved to another sponsor
- 6 ☐ change in community needs
- 7 ☐ other (specify) _____

Go to
next
program

C2. Which of the following best describes the stage of development of this PROGRAM at the present time?

Mark ONE circle only.

- 1 ☐ This PROGRAM is still at the conceptualization and planning stage: the objectives, target population and major activities have not yet been specified.
- 2 ☐ Basic planning for this PROGRAM is complete: the objectives, target population and major activities have been specified; however, the operational aspects of the PROGRAM - who will do what, where, when, how - have not been specified.
- 3 ☐ Planning for the PROGRAM is complete and the operational aspects of the PROGRAM have been agreed upon; however, activities have not yet begun.
- 4 ☐ Planning for the PROGRAM is complete: the operational aspects of the PROGRAM have been agreed upon; the PROGRAM is actually running - individuals are participating; however, the PROGRAM is very much in the experimental stage.
- 5 ☐ The planning and operational aspects of the PROGRAM have been worked out: the PROGRAM is running and individuals are participating; however, the PROGRAM is not running at capacity and/or some issues need to be resolved about engaging participants, program content, etc.
- 6 ☐ The planning and operational aspects of the PROGRAM have been worked out: the PROGRAM is running at or near capacity and major issues such as engaging participants, PROGRAM content, etc. have been resolved.

C3. Is this PROGRAM presently fully operational and running as planned?

- 7 ☐ Yes → Go to C5.
- 8 ☐ No

C4. When do you expect this PROGRAM to be fully operational and running as planned?

Mark ONE circle only.

- 1 ☐ within 3 months of initial funding
- 2 ☐ within 3 to 6 months after initial funding is received
- 3 ☐ within 7 to 11 months after initial funding is received
- 4 ☐ 1 to 2 years after initial funding is received
- 5 ☐ more than 2 years after initial funding is received

<p>Enter the name of each PROGRAM operating under this PROJECT, then answer the questions for each of the programs. (Use additional forms if there are more than three programs in the project.)</p> <p>Note: The program names and numbers must be the same as reported on the "List of Programs in your Project".</p>	<p>Program Name: _____</p> <p>Program Number: </p> <p>What is this program's status?</p> <p>1 <input type="radio"/> Program has been active and operating for most or all of the past six months → Go to C2.</p> <p>2 <input type="radio"/> Program was not operating for most or all of the past six months, but has not been cancelled (e.g. seasonal on hiatus until next session starts, offered on demand) → Go to C2.</p> <p>3 <input type="radio"/> Program is no longer in operation and is not expected to operate again → End date of program Go to C1</p>
---	---

<p>C5. Which one of the following major categories would describe the main focus of this PROGRAM?</p> <p>Mark ONE circle only</p>	<p>01 <input type="radio"/> child-focused PROGRAM (e.g. additional resources for existing child care services, toy lending libraries, opportunities for stimulation, socialization, skill development)</p> <p>02 <input type="radio"/> parent-focused PROGRAM (e.g. training and support groups for parents only, pre and post-natal programs)</p> <p>03 <input type="radio"/> family-focused PROGRAM (program in which both parent and child participate)</p> <p>04 <input type="radio"/> community development-focused PROGRAM (e.g. improving quality of life in the community by increasing community resources, improving safety, increasing neighbourhood cohesion)</p> <p>05 <input type="radio"/> service network-focused PROGRAM (e.g. to improve the integration/co-ordination of services, increase the availability, accessibility or quality of services)</p>
<p>C6. Does the PROGRAM follow a packaged outline?</p> <p>(e.g. a manual, video, or other documentation such as "Nobody's Perfect")</p>	<p>1 <input type="radio"/> yes → name of outline: _____</p> <p>2 <input type="radio"/> no</p>
<p>C7. From how many different sites (e.g. buildings, regular stops of mobile unit) is this PROGRAM delivered?</p>	<p>3 <input type="radio"/> one</p> <p>4 <input type="radio"/> two</p> <p>5 <input type="radio"/> three</p> <p>6 <input type="radio"/> four or more</p>

In the following questions, indicate all benefits expected, even if they are not the primary focus of the program (e.g. a child-focused program may also have benefits for the parents or community).

<p>C8.i What are the benefits expected from this PROGRAM, for the <u>CHILDREN</u> affected?</p> <p>Please check ALL that apply.</p>	<p>1 <input type="radio"/> children are not directly affected by this PROGRAM</p> <p>2 <input type="radio"/> improved physical health</p> <p>3 <input type="radio"/> improved cognitive function, including language development and school readiness</p> <p>4 <input type="radio"/> improved social-emotional health including better interpersonal functioning, higher self-esteem and happiness</p> <p>5 <input type="radio"/> fewer risks to the child at birth such as prenatal complications, low birth weight or prolonged hospitalization</p> <p>6 <input type="radio"/> fewer risks to the child during infancy or later including injuries</p> <p>7 <input type="radio"/> other (specify) _____</p>
--	---

For office use only.

<p>Enter the name of each PROGRAM operating under this PROJECT, then answer the questions for each of the programs. (Use additional forms if there are more than three programs in the project.)</p> <p>Note: The program names and numbers must be the same as reported on the "List of Programs in your Project".</p>	<p>Program Name: _____</p> <p>Program Number: </p> <p>What is this program's status?</p> <p><input type="radio"/> Program has been active and operating for most or all of the past six months → Go to C2.</p> <p><input type="radio"/> Program was not operating for most or all of the past six months, but has not been cancelled (e.g. seasonal on hiatus until next session starts, offered on demand) → Go to C2.</p> <p><input type="radio"/> Program is no longer in operation and is not expected to operate again → End date of program day month year Go to C1</p>
---	---

<p>C8.ii What are the benefits expected from this PROGRAM, for the <u>PARENTS</u> affected?</p> <p>Please check ALL that apply.</p>	<p><input type="radio"/> 01 parents are not directly affected by this PROGRAM</p> <p><input type="radio"/> 02 improved caretaking skills</p> <p><input type="radio"/> 03 higher levels of social support including opportunities for socialization</p> <p><input type="radio"/> 04 increased coping resources, including improved sense of well-being, self-esteem and sense of control</p> <p><input type="radio"/> 05 higher standard of living (e.g. increased income, improved housing, employment)</p> <p><input type="radio"/> 06 improved family functioning</p> <p><input type="radio"/> 07 other (specify) _____</p> <p> For office use only.</p>
<p>C8.iii What are the benefits expected from this PROGRAM, for the <u>NEIGHBOURHOODS OR COMMUNITIES</u> affected?</p> <p>Please check ALL that apply.</p>	<p><input type="radio"/> 1 neighbourhoods or communities are not directly affected by this PROGRAM</p> <p><input type="radio"/> 2 higher levels of neighbourhood/community spirit</p> <p><input type="radio"/> 3 improved safety or security</p> <p><input type="radio"/> 4 more resources such as parks, playgrounds, recreational facilities, etc.</p> <p><input type="radio"/> 5 other (specify) _____</p> <p> For office use only.</p>
<p>C8.iv What are the benefits expected from this PROGRAM, for the <u>SERVICE DELIVERY NETWORK</u> affected?</p> <p>Please check ALL that apply.</p> <p>Examples of "service delivery network":</p> <ul style="list-style-type: none"> - child protection agency - tenants' association 	<p><input type="radio"/> 01 the service delivery network is not directly affected by this PROGRAM</p> <p><input type="radio"/> 02 higher levels of integration, co-ordination</p> <p><input type="radio"/> 03 increased availability and accessibility of services</p> <p><input type="radio"/> 04 improved quality of service</p> <p><input type="radio"/> 05 other (specify) _____</p> <p> For office use only.</p>
<p>C9. What ages are the children served by this PROGRAM?</p> <p>Please check ALL that apply.</p>	<p><input type="radio"/> 1 children are not served directly by this PROGRAM</p> <p><input type="radio"/> 2 before birth</p> <p><input type="radio"/> 3 birth to 11 months</p> <p><input type="radio"/> 4 1 to 3 years</p> <p><input type="radio"/> 5 4 to 5 years</p> <p><input type="radio"/> 6 _____</p>

Enter the name of each PROGRAM operating under this PROJECT, then answer the questions for each of the programs. (Use additional forms if there are more than three programs in the project.)

Note: The program names and numbers must be the same as reported on the "List of Programs in your Project".

Program Name: _____

Program Number:

What is this program's status?

- ☐ Program has been active and operating for most or all of the past six months → Go to C2.
- ☐ Program was not operating for most or all of the past six months, but has not been cancelled (e.g. seasonal or hiatus until next session starts, offered on demand) → Go to C2.
- ☐ Program is no longer in operation and is not expected to operate again → End date of program day month year
Go to C1

C10. Whom does this PROGRAM target (i.e., priority population)?

Please check ALL that apply.

Women:

- ☐ women expecting their first child
- ☐ pregnant women

Parents:

- ☐ parents who need training in child care, management or supervision
- ☐ parents with children 6 years and under

Families:

- ☐ single parent families
- ☐ families living in poverty
- ☐ families referred by the existing service system as needing special help or support
- ☐ families who are new or relatively new to Canada
- ☐ off-reserve Aboriginal, Métis or Inuit families
- ☐ families who are highly mobile or transient (e.g. farm labourers, etc.)

Children:

- ☐ children who need supplemental care (e.g. day care, respite care)
- ☐ children who need extra opportunities for learning, socialization or skill development
- ☐ other (specify) _____

For office use only.

C11. What are the major activities of this PROGRAM?

Please check ALL that apply.

- ☐ one-on-one sessions
- ☐ discussion groups
- ☐ formal classes
- ☐ drop-in activities
- ☐ home visits → Go to C12.
- ☐ mobile units
- ☐ other (specify) _____
- Go to C13
- Go to C13

Enter the name of each PROGRAM operating under this PROJECT, then answer the questions for each of the programs. (Use additional forms if there are more than three programs in the project.)

Note: The program names and numbers must be the same as reported on the "List of Programs in your Project".

Program Name: _____

Program Number:

What is this program's status?

- ☐ 1 Program has been active and operating for most or all of the past six months → Go to C2.
- ☐ 2 Program was not operating for most or all of the past six months, but has not been cancelled (e.g. seasonal, on hiatus until next session starts, offered on demand) → Go to C2.
- ☐ 3 Program is no longer in operation and is not expected to operate again → End date of program day month year
Go to C1

C12. Who visits the family home?

Please check ALL that apply.

- ☐ 1 professional staff (professional nurse, social worker, physician, dietitian, nutritionist, occupational or physical therapist, lactation consultant, midwife)
- ☐ 2 para-professional staff (parent-aide, shelter worker, social services worker, project manager)
- ☐ 3 trained volunteers (La Leche League mums, Inendly visitors)
- ☐ 4 untrained volunteers
- ☐ 5 other (specify) _____

C13. Over the last month, approximately how many different CHILDREN participated each week?

Example of "different children":

- if child participates in PROGRAM twice in one week, count child only once.

999 ☐ PROGRAM is not for children

or

children

(If none are participating yet, enter "000")

C14. Over the last month, approximately how many different PARENTS OR CAREGIVERS participated each week?

Example of "different parents or caregivers":

- if parent or caregiver participates in PROGRAM twice in one week, count parent or caregiver only once.

998 ☐ PROGRAM is not for parents or caregivers

or

parents or caregivers

(If none are participating yet, enter "000")

C15. How many hours in total is the PROGRAM offering services each week?

999 ☐ not applicable given PROGRAM structure

or

hours per week

(If program is not offering services yet, enter "000")

C16. Over the last month, how many different sessions could a participant attend each week?

98 ☐ not applicable given PROGRAM structure

or

99 ☐ less than one session per week (e.g. one session per month)

or

sessions per week

(If program is not operating yet, enter "00")

Enter the name of each PROGRAM operating under this PROJECT, then answer the questions for each of the programs. (Use additional forms if there are more than three programs in the project.)

Note: The program names and numbers must be the same as reported on the "List of Programs in your Project".

Program Name: _____

Program Number: 

What is this program's status?

- ☐ Program has been active and operating for most or all of the past six months → Go to C2.
- ☐ Program was not operating for most or all of the past six months, but has not been cancelled (e.g. seasonal, on hiatus until next session starts, offered on demand) → Go to C2.
- ☐ Program is no longer in operation and is not expected to operate again → End date of program day month year
Go to C1

C17. Over the last month, for how many hours would each participant be involved each week on average?
(Round partial hours to the nearest full hours.)

☐ not applicable given PROGRAM structure

or

☐ less than one hour per week

or

hours per week (If program is not operating yet, enter "00")

C18. In the last 6 months, in how many weeks did the PROGRAM operate?

(Note: 26 weeks = 6 months)

weeks (If program is not operating yet, enter "00")

C19. Describe the setting or location where this PROGRAM takes place.

Please check ALL that apply.

- ☐ space belonging to community agency or service provider (e.g. Children's Aid, children's mental health centre, YM/YWCA)
- ☐ space belonging to government agency or department
- ☐ space belonging to local service club (e.g. Lions, Rotary)
- ☐ space belonging to local religious group (e.g. church, mosque, synagogue)
- ☐ advocacy group (e.g. women's group, tenants' or neighbourhood / community association, welfare rights group)
- ☐ space belonging to provincial/territorial organization or association
- ☐ space belonging to national organization or association
- ☐ in homes of participants, staff, or volunteers
- ☐ in a mobile unit at various locations
- ☐ other (specify) _____

C20. What is the current role of potential consumers or participants in DELIVERING the PROGRAM?

Please check ALL that apply.

(Note: If program is not yet operational, please indicate the planned role.)

- ☐ a volunteer role for identifying and enlisting participants
- ☐ a volunteer role in providing services
- ☐ a paid staff role
- ☐ no role in delivering the PROGRAM
- ☐ other (specify) _____

Enter the name of each PROGRAM operating under this PROJECT, then answer the questions for each of the programs. (Use additional forms if there are more than three programs in the project.)

Note: The program names and numbers must be the same as reported on the "List of Programs in your Project".

Program Name: _____

Program Number:

--	--

What is this program's status?

- ☐ 1 Program has been active and operating for most or all of the past six months → Go to C2.
- ☐ 2 Program was not operating for most or all of the past six months, but has not been cancelled (e.g. seasonal, on hiatus until next session starts, offered on demand) → Go to C2.
- ☐ 3 Program is no longer in operation and is not expected to operate again → End date of program

day	month	year	

Go to C1

C21. What is the current role of potential consumers or participants in the MANAGEMENT of this PROGRAM?

Please check ALL that apply.

(Note: If program is not yet operational, please indicate the planned role.)

- ☐ 01 no role in the management of the program
- ☐ 02 they have informal opportunities to express their views or opinions about the PROGRAM
- ☐ 03 they have formal opportunities to express their views or opinions about the PROGRAM (e.g. through interviews, surveys, focus groups)
- ☐ 04 they sit on working groups, planning committees or advisory committees that make recommendations about the PROGRAM to a management committee; however, they will not have control over decisions made about the PROGRAM
- ☐ 05 they sit on a management or governing committee and vote or directly influence decisions about the PROGRAM
- ☐ 06 they govern program development and implementation and make all key decisions about the PROGRAM
- ☐ 07 other (specify) _____

C22. List the names of the agencies, organizations or groups actively involved in either the delivery or the management of this PROGRAM.

Please check and list ALL that apply.

- ☐ 1 community agency and service provider (e.g. Children's Aid, children's mental health centres, YM/YWCA)

- ☐ 2 government agency or department (excluding CAPC)

- ☐ 3 local service club (e.g. Lions, Rotary)

- ☐ 4 local religious group (e.g. church, mosque, synagogue)

- ☐ 5 advocacy group (e.g. women's group, tenants' or neighbourhood association, welfare rights or poverty group)

- ☐ 6 individual residents from the neighbourhood

- ☐ 7 provincial/territorial organization or association

- ☐ 8 national organization or association

- ☐ 9 other (specify) _____

<p>Enter the name of each PROGRAM operating under this PROJECT, then answer the questions for each of the programs. (Use additional forms if there are more than three programs in the project.)</p> <p>Note: The program names and numbers must be the same as reported on the "List of Programs in your Project".</p>	<p>Program Name: _____</p> <hr/> <p>Program Number: </p> <p>What is this program's status?</p> <p>1 <input type="radio"/> Program has been active and operating for most or all of the past six months → Go to C2.</p> <p>2 <input type="radio"/> Program was not operating for most or all of the past six months, but has not been cancelled (e.g. seasonal or hiatus until next session starts, offered on demand) → Go to C2</p> <p>3 <input type="radio"/> Program is no longer in operation and is not expected to operate again → End date of program Go to C1</p>
---	--

<p>C23. What is learned from a PROGRAM may be more important than what was done. List below the <u>new ideas or lessons learned</u> during the last 6 months that will influence some aspect of this PROGRAM. (e.g. If we had to do it over again, what would we change? OR If a group setting up a similar program asked for advice, what would we tell them?)</p>	<p>01 <input type="radio"/> Ideas/lessons on Development:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>02 <input type="radio"/> Ideas/lessons on Objectives:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>03 <input type="radio"/> Ideas/lessons on Management:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>04 <input type="radio"/> Ideas/lessons on Activities:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>05 <input type="radio"/> Ideas/lessons on Other aspects:</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p>C24. Lessons learned can provide opportunities for making PROGRAM changes that will increase a PROGRAM'S chance for success. List the <u>changes you have made</u> to the PROGRAM in the last 6 months based on your experiences.</p>	<p>1 <input type="radio"/> Changes in Objectives:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>2 <input type="radio"/> Changes in Management:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>3 <input type="radio"/> Changes in Activities:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>4 <input type="radio"/> Changes in Other aspects:</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p>C25. Have the objectives of this PROGRAM changed from the original funded objectives?</p>	<p>5 <input type="radio"/> Yes → If yes, describe the changes:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>6 <input type="radio"/> No</p>

**APPENDIX TWO
DEMOGRAPHIC INFORMATION FORM**

Appendix Two: Demographic Information Form

The Community Action Program For Children (CAPC) of Hamilton-Wentworth

Dear Parent:

Welcome to one of our Community Action Program for Children (CAPC) programs. We need to ask you a few questions about your family so that we can let the people who pay for the programs know who CAPC is serving. Your say will help them decide if CAPC programs will get more funding after June 1997. Your comments are very important to us!

First name: _____

Last name: _____

Program name: _____

Today's Date: _____

Please circle the phrase that best describes your family:

- 1 single parent family
- 2 two parent family
- 3 several relatives living together

Parent 1 (Female): date of birth

month day year

Parent 2 (Male): date of birth:

month day year

Name(s) of child(ren)
(first, last)

Date of Birth

_____	Male	Female	_____
_____	Male	Female	_____
_____	Male	Female	_____
_____	Male	Female	_____
_____	Male	Female	_____

Please circle the language(s) spoken most often at home:

- 1 English
- 2 French
- 3 Other (please name): _____

Please circle your average yearly household income (before taxes):

- 1 less than \$5 000
- 2 \$5 000 TO \$9 999
- 3 \$10 000 TO \$14 999
- 4 \$15 000 TO \$19 999
- 5 \$20 000 TO \$29 999
- 6 \$30 000 TO \$39 999
- 7 \$40 000 TO \$49 999
- 8 \$50 000 TO \$59 999
- 9 \$60 000 or more

Please circle your education history:

Parent 1
(Female)

Parent 2
(Male)

- | | | |
|---|---|---|
| 1 | 1 | no formal schooling |
| 2 | 2 | some elementary |
| 3 | 3 | completed elementary |
| 4 | 4 | some secondary |
| 5 | 5 | completed secondary |
| 6 | 6 | some community or technical college |
| 7 | 7 | completed community or technical college |
| 8 | 8 | some university |
| 9 | 9 | completed university or teacher's college |

Please circle your current type of employment outside of the home (are you working?):

Parent 1
(Female)

Parent 2
(Male)

- | | | |
|---|---|------------------------------|
| 1 | 1 | full-time |
| 2 | 2 | part-time |
| 3 | 3 | not working outside the home |

Why do you come to this program?

To find out the effect of the CAPC program on your family, we would like to interview 50 people now and again in one year. The interview will take about one hour and can be done at your home or at the program. All information will be kept confidential (secret). You will get \$20 for your time. Would you like to take part in the CAPC follow-up study?

Yes No

If yes, please give us your current address and telephone number:

Address:

Telephone Number:

If no, please tell us why:

Thank you very much for your help!

APPENDIX THREE
WRITTEN PARTICIPANT EVALUATION FORM

Appendix Three: Written Participant Evaluation Form

Oct. 6/94

PROGRAM TITLE: _____

DATES: _____

FACILITATOR(S)/WORKER(S): _____

Filled Out by: (Please fill out one form per family) _____

Please circle responses:

1. What did you find most helpful?

2. What did you find least helpful?

3. What are you doing differently because of the program (list 2 or 3 things):

4. Do you think this program has helped you with parenting?
Yes _____
No _____

How:

5. Would you recommend to a friend to come to this program?
Yes _____
No _____

6. What would you change for the next group? (Check all that apply).
____ Location, because it is hard to get to.
____ Location, because the physical setting is uncomfortable
____ I don't like the building in which the program was held
____ Time of the program (If checked, please suggest another) _____
____ Anything else (please list) _____

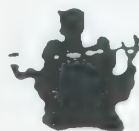
8. Overall, I would rate this program:



Hats Off



Thumbs Up



So So



Thumbs Down



Blah

APPENDIX FOUR
WRITTEN SERVICE PROVIDER EVALUATION FORM

Appendix Four: Written Service Provider Evaluation Form

Form #1

Oct. 3/94

ON-GOING PROCESS EVALUATION OF GROUP PROGRAMS

To be completed by group facilitators with input from participants:

Program:

Session #:

Group Facilitator(s):

Date:

Overall program objective(s):

Topic of session:

Anticipated Aim(s)/Objective(s) of session (should be fairly specific):

Activities of the session:

Other issues raised/discussed by participants:

Evaluation of session (by facilitators):

Recommendations for future sessions on this topic (by participants):

Recommendations for future sessions on this topic (by facilitators):

**APPENDIX FIVE
ATTENDANCE FORM**

2000

INITIATOR(s):

Number of Participants Enrolled:

[illegible]

Yes: ✓
No: Reason for not attending if known, write unknown if unknown

APPENDIX SIX
FOCUS GROUP QUESTIONS

Appendix Six

Hamilton-Wentworth Community Action Program for Children (CAPC) Focus Group Questions for Program Evaluation

(items in brackets describe the data we are looking for, each program will use probes related to the program to obtain this information)

A) Expectations of the Program:

1. How did you find out about the program?
(referral source)
2. What assistance were you looking for from the program?
(clients' perception, personal expectations or presenting problem)
3. What changes in your life did you think you would make from being involved in this program?(meeting people, learning things about infant & child care, a break or chance to get out of the house, free food; help with planning to go back to school, help with finding a job)

B) Effects of the Program on Participants' Lives:

1. Please describe the areas that you received assistance with (ie., parenting, household management, budgeting, community supports, career planning).
2. What are you doing more of as a result of your involvement with the program?
3. What are you doing less of as a result of your involvement with the program?
4. What happens in your life when you make use of the information or do things differently?
5. How will you use the information, knowledge or skills gained from your program involvement to benefit:
 - a) yourself
 - b) your child(ren)
 - c) your family
 - d) your community

C) Why Participants Attend:

1. What is it about the program that keeps you coming?
2. What gets in the way of your coming to the program?
3. Do you miss it if you don't come? If yes, why?
4. What would you say is your most important reason for coming to the program?

D) Program Recruitment:

1. Are there people you know who could use the program?
2. Would you mention the program to your friends?
3. What would convince them to come or help them to get to the program?

E) Participant Feedback About the Program:

1. What changes would you like to see in the program?
(review topics covered in the program to refresh participants' memories)
2. Were you given the opportunity to share your ideas, opinions, and concerns in a way that made you feel comfortable and was helpful? Please explain.
3. What role, if any, would you like to play in the future of this program?
4. If you have attended other programs, how was this program different?

F) Wrap-Up:

1. Does anyone have any other comments?
2. How did you feel about this group discussion?

APPENDIX SEVEN
QUALITATIVE INTERVIEW QUESTIONS

Appendix Seven

Hamilton-Wentworth Community Action Program for Children (CAPC) Questions for the Local Qualitative Interviews with Program Participants

A) Expectations of the Program

- 1) How did you find out about CAPC (referral source)
- 2) How soon after you found out about CAPC did you decide to come to its program(s)?
- 3) How did you feel about coming to CAPC? (what do you mean?) Has that feeling changed? Why do you think so?
- 4) Which CAPC program(s) are you involved in? How much do you know about the other CAPC programs?
- 5) What were you hoping CAPC would offer you?
- 6) What changes in your did you think you could make from being involved with CAPC?

B) Why Participants Attend

- 1) What is it about CAPC that keeps you coming?
- 2) What gets in the way of your coming to CAPC? (barriers)
- 3) If you don't come to a CAPC session, do you miss it? Please explain.
- 4) What would you say is the most important reason for being involved with CAPC? The least important reason?

C) Program Recruitment

- 1) Are there people you know who could use CAPC? Why or Why not? (If "no", go to section D).
- 2) Have you recommended CAPC to other people? What did you tell them? How interested were they? Why do you think they were interested/not interested?
- 3) How would you suggest we encourage people to become involved in CAPC?

D) Affects of the Program on Participants' Lives

Now I'd like to ask you some questions which are more personal. These questions are being asked to find out how CAPC has affected your lifestyle, or your relationships, etc...

So I might get a better idea of how you fit CAPC into your life, I thought we might begin this session by drawing an "ECO" map.. Let me show you what I mean... (and interviewer draws own eco map by way of example)

(person starts with symbol for self, then adds symbols for family, significant others, agencies, schools, work, programs, etc., etc., joining the symbols with solid or broken lines representing strength of the relationship. Interviewer assists by advising: first you place yourself somewhere on the page...now you add the person(s) closest to you (who is that?) now, what about your children/partner, where would you place them? what other people are in your life ... getting finally to CAPC).

(keep the map, with permission and have the person code the systems within it for you)

- 1) What sorts of stresses do you have in your life? How do these stresses affect you?
- 2) Is CAPC helping you to deal with these stresses? If yes, How? If no, what do you mean?
- 3) What are you doing more of as a result of your involvement with CAPC?
- 4) What are you less of as a result of your involvement with CAPC?
- 5) From your experience with CAPC, have you learned to do things differently? If yes, what happens in your life when you do things differently? If no, please explain.
- 6) Looking ahead for yourself, what would like for yourself? (where would you like to be? what would you like to do?) What do you think you need to do to prepare for this? (where would you go for advice about your _____, how would you start? Then what would you do?) What else needs to be in place?

E) Community Resources

The next few questions have to do with other services in your community which you may, or may not have used.

- 1) What resources or services in your community did or might have assisted you before and during pregnancy? Please explain.
- 2) What resources of services in your community are you familiar with related to parenting?

- 3) Have any of these services assisted you with your parenting? Please explain. Please describe them.
- 4) What other resources or services in your community could assist you with parenting?
- 5) What other community services would you like to have?

F) Participant Feedback About the Program

- 1) If you have been involved with other community services, how was CAPC different?
- 2) Are the staff from CAPC different from other professionals you've had experience with? If so, How?
- 3) What changes would you like to see in CAPC?
- 4) Were you given the opportunity to share your ideas, opinions and concerns in a way that made you feel comfortable and was helpful to you? To others in the program? Please explain.
- 5) Do you feel you have input into CAPC? What do you mean?
- 6) What future role to you see yourself having in CAPC?

G) Effects of the Current Political Climate on the Participant

The last few questions are government and its affects on people like yourself. May I ask you your opinion?

- 1) How do you think you could have influence on the government at the following levels: local, provincial, federal.
- 2) Have you ever contacted your local representative of the government? If so, what happened?
- 3) If you could talk to a politician responsible for the cuts what would say to tell them about the effects of the cuts on you and your child(ren)/partner?
- 4) Is CAPC helping you deal with the cutbacks from the provincial government? If yes, how? If no, how do you think CAPC could help with the cutbacks?
- 5) Given the changes being made by the provincial government, what do you think CAPC should be focusing on?

CLOSING

Is there anything else, at all, you would like to add. THANK YOU.

APPENDIX EIGHT
LONG - TERM FOLLOW UP QUANTITATIVE INTERVIEW

Community Action Program for Children

Health Canada – protected when completed

Aussi disponible en français

Appendix Eight National Evaluation Long Term Follow-Up Quantitative Interview

Form "E"

PROGRAM PARTICIPANTS



INTRODUCTION (to be read to respondent)

Hello, I'm ...(your name)... of (name of organization).
Not long ago, you or a member of your family registered in a program sponsored by Health Canada's Community Action Program for Children (CAPC). With the program staff you completed a questionnaire by which you assisted in the evaluation of the services of the program.

Your household has been randomly selected to participate in a follow-up interview. The information collected during this interview will be used by Health Canada and the program staff to assess

whether CAPC programs are helping parents and children in the ways that they were intended.

While your participation is voluntary, your help is important. Your answers will be used in the evaluation of CAPC by Health Canada or for consistent uses such as other studies of community services. Results will be presented only as statistical aggregates; names and addresses of participants will never be connected with the results of the study.

Project Number: 4927-06-93/0029

Language: E

Project Name: Community Action Program for Children
(CAPC): Hamilton-We

Province: ONTARIO

FED Number: 0529 FED Name: Hamilton East

Program Number	<input type="text"/>	Sequential Family Number	<input type="text"/>
Program Name	<input type="text"/>		<input type="text"/>

Date	Time	Notes	Final Status of Interview
			1 <input type="radio"/> fully completed
			2 <input type="radio"/> partially completed
			3 <input type="radio"/> refusal by participant or primary caregiver
			4 <input type="radio"/> refusal by other household member
			5 <input type="radio"/> unable to trace
			6 <input type="radio"/> unable to contact
			7 <input type="radio"/> death
			8 <input type="radio"/> duplicate
			9 <input type="radio"/> other non-response (specify) _____

Start interview here



Day Month Year	Hour Min	Language of questionnaire
Date of interview: <input type="text"/>	Time start: <input type="text"/> (24 hour clock)	1 <input checked="" type="radio"/> English

Verify the following information with the respondent.

Name of program participant (first name only) from Form D, item 1	
Name of primary caregiver (first name only) from Form D, item 3	OR 1 <input type="radio"/> participant is 12 years or older
Name of randomly selected child of the participant	OR 2 <input type="radio"/> participant has no children

SECTION A: Background

A1. INTERVIEWER: Ask the primary caregiver (or participant if 12 years or over) the following questions.

These first few questions are about your background and current circumstances. In what country were you born? (Do not read list. Mark one only.)

- | | |
|-------------------------------------|--|
| 01 <input type="radio"/> Canada | 13 <input type="radio"/> Jamaica |
| 02 <input type="radio"/> Bangladesh | 14 <input type="radio"/> Netherlands |
| 03 <input type="radio"/> China | 15 <input type="radio"/> Philippines |
| 04 <input type="radio"/> France | 16 <input type="radio"/> Poland |
| 05 <input type="radio"/> Germany | 17 <input type="radio"/> Portugal |
| 06 <input type="radio"/> Greece | 18 <input type="radio"/> Russia |
| 07 <input type="radio"/> Guyana | 19 <input type="radio"/> Somalia |
| 08 <input type="radio"/> Hong Kong | 20 <input type="radio"/> Sri Lanka |
| 09 <input type="radio"/> Hungary | 21 <input type="radio"/> United Kingdom |
| 10 <input type="radio"/> India | 22 <input type="radio"/> United States |
| 11 <input type="radio"/> Iran | 23 <input type="radio"/> Vietnam |
| 12 <input type="radio"/> Italy | 24 <input type="radio"/> Other (specify) _____ |

A2. To which ethnic or cultural group(s) did your ancestors belong? (For example: French, English, Chinese, etc.) (Do not read list. Mark all that apply.)

- | | |
|--|--|
| 01 <input type="radio"/> Canadian | 10 <input type="radio"/> Chinese |
| 02 <input type="radio"/> French | 11 <input type="radio"/> Jewish |
| 03 <input type="radio"/> English | 12 <input type="radio"/> Polish |
| 04 <input type="radio"/> German | 13 <input type="radio"/> Portuguese |
| 05 <input type="radio"/> Scottish | 14 <input type="radio"/> South Asian |
| 06 <input type="radio"/> Irish | 15 <input type="radio"/> Black |
| 07 <input type="radio"/> Italian | 16 <input type="radio"/> North American Indian |
| 08 <input type="radio"/> Ukrainian | 17 <input type="radio"/> Métis |
| 09 <input type="radio"/> Dutch (Netherlands) | 18 <input type="radio"/> Inuit/Eskimo |
| | 19 <input type="radio"/> Other (specify) _____ |

A3. In which language(s) can you conduct a conversation? (Do not read list. Mark all that apply.)

- | | |
|--|---|
| 01 <input type="radio"/> English | 14 <input type="radio"/> Spanish |
| 02 <input type="radio"/> French | 15 <input type="radio"/> Tagalog (Filipino) |
| 03 <input type="radio"/> Arabic | 16 <input type="radio"/> Ukrainian |
| 04 <input type="radio"/> Chinese | 17 <input type="radio"/> Vietnamese |
| 05 <input type="radio"/> German | |
| 06 <input type="radio"/> Greek | Aboriginal languages |
| 07 <input type="radio"/> Hungarian | 18 <input type="radio"/> Cree |
| 08 <input type="radio"/> Italian | 19 <input type="radio"/> Ojibway |
| 09 <input type="radio"/> Korean | 20 <input type="radio"/> Athapaskan (Dene) |
| 10 <input type="radio"/> Persian (Farsi) | |
| 11 <input type="radio"/> Polish | 21 <input type="radio"/> Other language (specify) _____ |
| 12 <input type="radio"/> Portuguese | |
| 13 <input type="radio"/> Punjabi | |

A4. What is your date of birth?

Day Month Year

--	--	--	--	--	--	--	--	--	--

99 ☐ Rel

A5. INTERVIEWER: record gender of respondent

- 1 ☐ male

A6. What is your current marital status?

- 01 ☐ now married
 02 ☐ common law
 03 ☐ living with a partner
 04 ☐ single (never married)
 05 ☐ widowed
 06 ☐ separated
 07 ☐ divorced
 08 ☐ Rel

A7. Excluding kindergarten, how many years of elementary and high school have you successfully completed? (Do not read list. Mark one only.)

- 01 ☐ No schooling → Go to Question A11
 02 ☐ one to five years
 03 ☐ six
 04 ☐ seven
 05 ☐ eight
 06 ☐ nine
 07 ☐ ten
 08 ☐ eleven
 09 ☐ twelve
 10 ☐ thirteen

A8. Have you graduated from high school?

- 1 ☐ yes
 2 ☐ no

A9. Have you ever attended any other kind of school such as university, community college, business school, trade or vocational school, Cégep or other post-secondary institution?

- 3 ☐ yes
 4 ☐ no → Go to Question A11

A10. What is the highest level of education that you have attained? (Do not read list. Mark one only.)

- 01 ☐ some trade, technical, vocational school or business college
 02 ☐ some community college, Cégep or nursing school
 03 ☐ some university
 04 ☐ diploma or certificate from trade, technical or vocational school, or business college
 05 ☐ diploma or certificate from community college, Cégep or nursing school
 06 ☐ bachelor's or undergraduate degree or teacher's college (e.g., B.A., B.Sc., LL.B.)
 07 ☐ master's degree (e.g., M.A., M.Sc., M.Ed.)
 08 ☐ degree in medicine, dentistry, veterinary medicine or optometry (M.D., D.D.S., D.M.D., D.V.M., O.D.)
 09 ☐ earned doctorate (e.g., Ph.D., D.Sc., D.Ed.)
 10 ☐ other (specify) _____

A11. What do you consider to be your current main activity? For example, working for pay or profit, caring for family. (Do not read list. Mark one only.)

- 1 ☐ caring for family
 2 ☐ working for pay or profit
 3 ☐ caring for family and working for pay or profit
 4 ☐ going to school
 5 ☐ recovering from illness/on disability
 6 ☐ looking for work
 7 ☐ retired
 8 ☐ other

A12. Have you worked for pay or profit at any time in the past 12 months?

- ¹ ☐ yes
² ☐ no

A13. Please look at your response booklet on page 1. What was the total income of your household over the past 12 months? Just tell me the letter.

- ⁰¹ ☐ no income
A) ⁰² ☐ \$ 1 to 4 999
B) ⁰³ ☐ \$ 5 000 to \$ 9 999
C) ⁰⁴ ☐ \$10 000 to \$14 999
D) ⁰⁵ ☐ \$15 000 to \$19 999
E) ⁰⁶ ☐ \$20 000 to \$29 999
F) ⁰⁷ ☐ \$30 000 to \$39 999
G) ⁰⁸ ☐ \$40 000 to \$49 999
H) ⁰⁹ ☐ \$50 000 to \$59 999
I) ¹⁰ ☐ \$60 000 to \$79 999
J) ¹¹ ☐ \$80 000 or more
¹² ☐ DK
¹³ ☐ Rel

SECTION B: CAPC Program

B1. These questions are about your experiences in (name of CAPC Program from front page of this form). First of all, how did you hear about (name of program)? (Do not read list. Mark all that apply.)

- ¹ ☐ advertisement
² ☐ friend or neighbour
³ ☐ program participant
⁴ ☐ doctor
⁵ ☐ public health nurse
⁶ ☐ child protection worker
⁷ ☐ other service provider
⁸ ☐ in some other way (specify) _____
⁹ ☐ don't remember

B2. About how many times did you or (name of child participant) attend the program in the last week? Would you say...

- ⁰¹ ☐ not at all
⁰² ☐ 1 or 2 times
⁰³ ☐ 3 or 4 times
⁰⁴ ☐ 5 or more times
⁰⁵ ☐ DK
⁰⁶ ☐ Rel

B3. Do you have any say in how the program runs?

- ¹ ☐ Yes → Go to Question B4
² ☐ No
³ ☐ Rel → Go to Question B5

B4. In what way do you have a say in how the program runs? (Do not read list. Mark all that apply.)

- ⁴ ☐ I sit on a committee that runs the program
⁵ ☐ I sit on a committee that gives advice about how the program should be run
⁶ ☐ I offer suggestions
⁷ ☐ Something else

B5. Do you help run the program in any way? (i.e. participates in provision of day-to-day services)

- ¹ ☐ yes → Go to Question B6
² ☐ no
³ ☐ Rel → Go to Question B7

B6. Do you volunteer or are you paid to help with the program? (Do not read list. Mark all that apply.)

- ⁰¹ ☐ I volunteer in the program
⁰² ☐ I am paid to help with the program
⁰³ ☐ Rel

B7. How helpful has the program been to you? Would you say...

- ¹ ☐ very helpful
² ☐ somewhat helpful
³ ☐ not very helpful
⁴ ☐ not helpful at all
⁵ ☐ DK
⁶ ☐ Rel

SECTION C: Neighbourhood or Community

C1. This section asks questions about your neighbourhood or community. These questions are important to help us understand the effects of different places on children. How long have you lived at this address?

years (Enter 00 if less than 1 year.)

- ⁹⁸ ☐ DK
⁹⁹ ☐ Rel

C2. How do you feel about your neighbourhood as a place to bring up children? Is it...

- ⁰¹ ☐ excellent
⁰² ☐ good
⁰³ ☐ average
⁰⁴ ☐ poor
⁰⁵ ☐ very poor
⁰⁶ ☐ DK
⁰⁷ ☐ Rel

C3. Do you do any volunteer work with any local organizations such as school groups, church or other religious groups, community agencies or ethnic organizations?

- ¹ ☐ yes → Go to Question C4
² ☐ no
³ ☐ DK → Go to Question C5
⁴ ☐ Rel

C4. What type of organization is it? (Do not read list. Mark all that apply.)

- ⁰¹ ☐ community agency or service provider (e.g. Children's Aid, children's mental health centres, YM/YWCA)
⁰² ☐ hospital or health care provider (e.g. VON, Red Cross, community health centre or CLSC)
⁰³ ☐ government agency or department (e.g. probation office, welfare office, tourist information centre)
⁰⁴ ☐ local service club (e.g. Lions, Rotary, Kinettes, Optimists)
⁰⁵ ☐ local religious group (e.g. church, mosque, synagogue)
⁰⁶ ☐ sports or recreational organization (e.g. coaching, refereeing)
⁰⁷ ☐ child or youth organization (e.g. Girl Guides, Scouts, Boys' and Girls' Club, Big Brothers or Big Sisters)
⁰⁸ ☐ school or child care centre (e.g. classroom volunteer PTA)
⁰⁹ ☐ advocacy group (e.g. women's group, tenants' or neighbourhood association, welfare rights group)
¹⁰ ☐ ethnic or cultural organization (e.g. immigrant

C5. INTERVIEWER: show respondent page 2 of response booklet. Next are statements that describe feelings a person can have about living in a neighbourhood. Please tell me whether you strongly agree, agree, disagree or strongly disagree with these statements about your feelings.

	strongly agree	agree	disagree	strongly disagree	DK	Ref
a) I feel like I belong in this neighbourhood	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>	06 <input type="radio"/>
b) I like to think of myself as similar to the people who live in the neighbourhood.	07 <input type="radio"/>	08 <input type="radio"/>	09 <input type="radio"/>	10 <input type="radio"/>	11 <input type="radio"/>	12 <input type="radio"/>
c) I feel I am important to this neighbourhood	13 <input type="radio"/>	14 <input type="radio"/>	15 <input type="radio"/>	16 <input type="radio"/>	17 <input type="radio"/>	18 <input type="radio"/>

C6. Please tell me whether you strongly agree, agree, disagree, or strongly disagree with these statements about your neighbourhood.

	strongly agree	agree	disagree	strongly disagree	DK	Ref
a) It is safe to walk alone in this neighbourhood after dark	19 <input type="radio"/>	20 <input type="radio"/>	21 <input type="radio"/>	22 <input type="radio"/>	23 <input type="radio"/>	24 <input type="radio"/>
b) It is safe for children to play outside during the day	25 <input type="radio"/>	26 <input type="radio"/>	27 <input type="radio"/>	28 <input type="radio"/>	29 <input type="radio"/>	30 <input type="radio"/>
c) There are good parks, playgrounds and play spaces in this neighbourhood	31 <input type="radio"/>	32 <input type="radio"/>	33 <input type="radio"/>	34 <input type="radio"/>	35 <input type="radio"/>	36 <input type="radio"/>

C7. The following statements are about people in neighbourhoods. Please tell me whether you strongly agree, agree, disagree or strongly disagree with the following statements when thinking of your neighbours.

	strongly agree	agree	disagree	strongly disagree	DK	Ref
a) If there is a problem around here, the neighbours get together to deal with it	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>	06 <input type="radio"/>
b) There are adults in the neighbourhood that children can look up to	07 <input type="radio"/>	08 <input type="radio"/>	09 <input type="radio"/>	10 <input type="radio"/>	11 <input type="radio"/>	12 <input type="radio"/>
c) People around here are willing to help their neighbours	13 <input type="radio"/>	14 <input type="radio"/>	15 <input type="radio"/>	16 <input type="radio"/>	17 <input type="radio"/>	18 <input type="radio"/>
d) You can count on adults in this neighbourhood to watch out that children are safe and don't get in trouble	19 <input type="radio"/>	20 <input type="radio"/>	21 <input type="radio"/>	22 <input type="radio"/>	23 <input type="radio"/>	24 <input type="radio"/>
e) When I'm away from home, I know that my neighbours will keep their eyes open for possible trouble	25 <input type="radio"/>	26 <input type="radio"/>	27 <input type="radio"/>	28 <input type="radio"/>	29 <input type="radio"/>	30 <input type="radio"/>

C8. The following are problems that arise in neighbourhoods. Would you say the following are a big problem, somewhat of a problem, or no problem in this neighbourhood.

	big problem	somewhat of a problem	no problem	DK	Ref
a) Litter, broken glass or garbage in the street or road, on the sidewalk, or on yards?	31 <input type="radio"/>	32 <input type="radio"/>	33 <input type="radio"/>	34 <input type="radio"/>	35 <input type="radio"/>
b) Selling or using drugs?	36 <input type="radio"/>	37 <input type="radio"/>	38 <input type="radio"/>	39 <input type="radio"/>	40 <input type="radio"/>
c) Alcoholics and excessive drinking in public?	41 <input type="radio"/>	42 <input type="radio"/>	43 <input type="radio"/>	44 <input type="radio"/>	45 <input type="radio"/>
d) Groups of young people who cause trouble?	46 <input type="radio"/>	47 <input type="radio"/>	48 <input type="radio"/>	49 <input type="radio"/>	50 <input type="radio"/>
e) Burglary of homes and apartments?	51 <input type="radio"/>	52 <input type="radio"/>	53 <input type="radio"/>	54 <input type="radio"/>	55 <input type="radio"/>
f) Unrest due to ethnic or religious differences?	56 <input type="radio"/>	57 <input type="radio"/>	58 <input type="radio"/>	59 <input type="radio"/>	60 <input type="radio"/>

C9. The following are statements about relationships and the support which you may get from others. For each of the following, please tell me whether you strongly agree, agree, disagree or strongly disagree.

	strongly agree	agree	disagree	strongly disagree	DK	Ref
a) If something went wrong, no one would help me	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>	06 <input type="radio"/>
b) I have family and friends who help me feel safe, secure and happy	07 <input type="radio"/>	08 <input type="radio"/>	09 <input type="radio"/>	10 <input type="radio"/>	11 <input type="radio"/>	12 <input type="radio"/>
c) There is someone I trust whom I could turn to for advice if I were having problems	13 <input type="radio"/>	14 <input type="radio"/>	15 <input type="radio"/>	16 <input type="radio"/>	17 <input type="radio"/>	18 <input type="radio"/>
d) There is no one I feel comfortable talking about problems with	19 <input type="radio"/>	20 <input type="radio"/>	21 <input type="radio"/>	22 <input type="radio"/>	23 <input type="radio"/>	24 <input type="radio"/>
e) I lack a feeling of closeness with another person	25 <input type="radio"/>	26 <input type="radio"/>	27 <input type="radio"/>	28 <input type="radio"/>	29 <input type="radio"/>	30 <input type="radio"/>
f) There are people I can count on in an emergency	31 <input type="radio"/>	32 <input type="radio"/>	33 <input type="radio"/>	34 <input type="radio"/>	35 <input type="radio"/>	36 <input type="radio"/>

C10. The next few questions are about services for families in your community. I am going to read a list of services and programs. Please tell me if each one is available in your community.

	yes	no	DK	Ref
a) emergency health care services (e.g., hospital, walk-in medical clinic)	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>
b) child day-care services (other than those provided by the CAPC program)	05 <input type="radio"/>	06 <input type="radio"/>	07 <input type="radio"/>	08 <input type="radio"/>
c) services for children with emotional or behavioural problems	09 <input type="radio"/>	10 <input type="radio"/>	11 <input type="radio"/>	12 <input type="radio"/>
d) library services	13 <input type="radio"/>	14 <input type="radio"/>	15 <input type="radio"/>	16 <input type="radio"/>
e) recreational services and programs for children	17 <input type="radio"/>	18 <input type="radio"/>	19 <input type="radio"/>	20 <input type="radio"/>
f) drop-in or recreational services for parents	21 <input type="radio"/>	22 <input type="radio"/>	23 <input type="radio"/>	24 <input type="radio"/>
g) health clinics such as mobile clinics, breast feeding clinics, etc.	25 <input type="radio"/>	26 <input type="radio"/>	27 <input type="radio"/>	28 <input type="radio"/>

C11. Was there ever a time in the past six months when you wanted help for a physical, social or emotional problem for yourself (or your child(ren)) but didn't get it?

- 1 ☐ yes → Go to Question C12
- 2 ☐ no
- 3 ☐ DK → Go to Question C14
- 4 ☐ Ref

C12. From what type of person or service provider did you want help? (Do not read list. Mark all that apply)

- 01 ☐ friend or family member
- 02 ☐ medical doctor
- 03 ☐ nurse
- 04 ☐ midwife
- 05 ☐ dentist
- 06 ☐ pharmacist or druggist
- 07 ☐ psychologist, social worker or other counsellor
- 08 ☐ children's Aid Society/child protection worker
- 09 ☐ children's mental health centre worker
- 10 ☐ school or child care staff
- 11 ☐ elder
- 12 ☐ traditional health worker
- 13 ☐ someone else

C13. Why didn't you get the help? (Do not read list. Mark all that apply.)

- 14 ☐ too expensive
- 15 ☐ didn't know whom to see, where to go or whom to call
- 16 ☐ too far away or transportation problem
- 17 ☐ couldn't get an appointment/takes too long/long waiting list
- 18 ☐ language problem
- 19 ☐ too embarrassed to go
- 20 ☐ no one seemed to care
- 21 ☐ past contacts were not helpful
- 22 ☐ too busy
- 23 ☐ help probably wouldn't do any good
- 24 ☐ something else (please describe) _____

C14. In general, do you think your community has enough services for families? Would you say...

- 1 ☐ yes, definitely
- 2 ☐ yes, I think so
- 3 ☐ no, I don't think so
- 4 ☐ no, definitely not
- 5 ☐ DK
- 6 ☐ Ref

C15. In general, how satisfied are you with the quality of services available in this community? Would you say...

- 01 ☐ very satisfied
- 02 ☐ satisfied
- 03 ☐ dissatisfied
- 04 ☐ very dissatisfied
- 05 ☐ DK
- 06 ☐ Ref

C16. How much of a say do you have in how the services and programs in your community are run? Would you say...

- 1 ☐ a great deal
- 2 ☐ some
- 3 ☐ very little
- 4 ☐ none at all
- 5 ☐ DK
- 6 ☐ Ref

C17. Do you think that it's important for people to have a say in how services and programs in their community are run? Would you say...

- 01 ☐ yes, definitely
- 02 ☐ yes, I think so
- 03 ☐ no, I don't think so
- 04 ☐ no, definitely not
- 05 ☐ DK

SECTION D. Health and Development

D1. INTERVIEWER :

- if the respondent is childless → 1 ☐ Go to Question F1
- otherwise → 2 ☐ Go to Question D2

D2. The next questions are about (name of child participant or randomly selected child) (see name on front cover)

What is (name of child participant)'s birthdate?

Day Month Year

--	--	--	--	--	--	--	--	--	--

(If child is 0 to 4 years of age insert number of months old) 3 month(s)

or

(If child is over 4 years of age, insert number of years old.) 4 years old

D3. Is (name of child participant) a boy or a girl?

- 5 ☐ boy
- 6 ☐ girl

D4. What is your relationship to (name of child participant)? (Mark one only)

- 01 ☐ birth parent
- 02 ☐ step parent (include common-law parent)
- 03 ☐ adoptive parent
- 04 ☐ foster parent
- 05 ☐ sister/brother
- 06 ☐ grandparent
- 07 ☐ in-law
- 08 ☐ other related/extended family member
- 09 ☐ unrelated

D5. In general, would you say (name of child participant)'s health is...

- 1 ☐ excellent
- 2 ☐ very good
- 3 ☐ good
- 4 ☐ fair
- 5 ☐ poor
- 6 ☐ DK
- 7 ☐ Ref

D6. What is (name of child participant)'s height?

1 centimetres

or

2 feet 3 inches

or

- 4 ☐ DK
- 5 ☐ Ref

D7. What is (name of child participant)'s weight?

1 kilograms

or

3 pounds

- 4 ☐ DK
- 5 ☐ Ref

D8. INTERVIEWER :

If (name of child participant) is less than 6 years old → 1 ☐ Go to Question D8A

D8A.

In the following questions long-term conditions refer to conditions that have lasted or are expected to last 6 months or more. Does (name of child participant) have any of the following long-term conditions that have been diagnosed by a health professional?

- | | yes | no |
|-----------------------------------|--------------------------|--------------------------|
| a) Allergies? | 01 <input type="radio"/> | 02 <input type="radio"/> |
| b) Bronchitis? | 03 <input type="radio"/> | 04 <input type="radio"/> |
| c) Heart condition or disease? | 05 <input type="radio"/> | 06 <input type="radio"/> |
| d) Epilepsy? | 07 <input type="radio"/> | 08 <input type="radio"/> |
| e) Cerebral palsy? | 09 <input type="radio"/> | 10 <input type="radio"/> |
| f) Kidney condition or disease? | 11 <input type="radio"/> | 12 <input type="radio"/> |
| g) Mental handicap? | 13 <input type="radio"/> | 14 <input type="radio"/> |
| h) Any other long term condition? | 15 <input type="radio"/> | 16 <input type="radio"/> |

Go to Question D8C

D8B.

In the following questions long-term conditions refer to conditions that have lasted or are expected to last 6 months or more. Does (name of child participant) have any of the following long-term conditions that have been diagnosed by a health professional?

- | | yes | no |
|--|--------------------------|--------------------------|
| a) Allergies? | 17 <input type="radio"/> | 18 <input type="radio"/> |
| b) Bronchitis? | 19 <input type="radio"/> | 20 <input type="radio"/> |
| c) Heart condition or disease? | 21 <input type="radio"/> | 22 <input type="radio"/> |
| d) Epilepsy? | 23 <input type="radio"/> | 24 <input type="radio"/> |
| e) Cerebral palsy? | 25 <input type="radio"/> | 26 <input type="radio"/> |
| f) Kidney condition or disease? | 27 <input type="radio"/> | 28 <input type="radio"/> |
| g) Mental handicap? | 29 <input type="radio"/> | 30 <input type="radio"/> |
| h) Learning disability? | 31 <input type="radio"/> | 32 <input type="radio"/> |
| i) Emotional, psychological or nervous difficulties? | 33 <input type="radio"/> | 34 <input type="radio"/> |
| j) Any other long term condition? | 35 <input type="radio"/> | 36 <input type="radio"/> |

D8C.

Does (name of child participant) have any long term conditions or health problems which prevent or limit his/her participation in school, at play, or in any other activity for a child of his/her age?

- 1 ☐ yes
- 2 ☐ no
- 3 ☐ DK
- 4 ☐ Ref

D9.

The following questions refer to injuries, such as a broken bone, bad cut or burn, head injury, poisoning, or a sprained ankle, which occurred in the past 12 months and were serious enough to require medical attention by a doctor, nurse or dentist. In the past 12 months was (name of child participant) injured?

- 5 ☐ yes → Go to Question D10
- 6 ☐ no
- 7 ☐ DK → Go to Question D12
- 8 ☐ Ref

D10.

How many times was (he/she) injured?

times

98 ☐ DK

99 ☐ Ref

D11. For the most serious injury, what type of injury did (name of child participant) have? (Do not read list. Mark one only.)

- 01 ☐ broken or fractured bones
- 02 ☐ burn or scald
- 03 ☐ dislocation
- 04 ☐ sprain or strain
- 05 ☐ cut, scrape or bruise
- 06 ☐ concussion
- 07 ☐ poisoning by substance or liquid
- 08 ☐ internal injury
- 09 ☐ dental injury
- 10 ☐ other
- 11 ☐ multiple injuries
- 12 ☐ DK
- 13 ☐ Ref

D12. INTERVIEWER : Check child's age from question D2.

- If the child is 4 years or more → 1 ☐ Go to Question D69
- otherwise → 2 ☐ Go to Question D13

D13. The following questions are about (name of child participant)'s motor and social development.

- If age is 0 to 3 months → 01 ☐ Go to Question D14
- If age is 4 to 6 months → 02 ☐ Go to Question D21
- If age is 7 to 9 months → 03 ☐ Go to Question D25
- If age is 10 to 12 months → 04 ☐ Go to Question D32
- If age is 13 to 15 months → 05 ☐ Go to Question D36
- If age is 16 to 18 months → 06 ☐ Go to Question D41
- If age is 19 to 21 months → 07 ☐ Go to Question D45
- If age is 22 to 47 months → 08 ☐ Go to Question D51

D14. When lying on his/her stomach, has (name of child participant) ever turned his/her head from side to side?

- 1 ☐ yes
- 2 ☐ no
- 3 ☐ DK
- 4 ☐ Ref

D15. Have his/her eyes ever followed a moving object?

- 5 ☐ yes
- 6 ☐ no
- 7 ☐ DK
- 8 ☐ Ref

D16. When lying on his/her stomach on a flat surface, has he/she ever lifted his/her head off the surface for a moment?

- 1 ☐ yes
- 2 ☐ no
- 3 ☐ DK
- 4 ☐ Ref

D17. Have his/her eyes ever followed a moving object all the way from one side to the other?

- 5 ☐ yes
- 6 ☐ no
- 7 ☐ DK

D18. Has he/she ever smiled at someone when that person talked to or smiled at (but did not touch) him/her?

- 1 ☐ yes
- 2 ☐ no
- 3 ☐ DK
- 4 ☐ Ref

D19. When lying on his/her stomach, has (name of child participant) ever raised his/her head and chest from the surface while resting his/her weight on his/her lower arms or hands?

- 5 ☐ yes
- 6 ☐ no
- 7 ☐ DK
- 8 ☐ Ref

D20. Has (name of child participant) ever turned his/her head around to look at something?

- 1 ☐ yes
- 2 ☐ no
- 3 ☐ DK
- 4 ☐ Ref

D21. When lying on his/her back and being pulled up to a sitting position, did (name of child participant) ever hold his/her head stiffly so that it did not hang back as he/she was pulled up?

- 5 ☐ yes
- 6 ☐ no
- 7 ☐ DK
- 8 ☐ Ref

D22. Has he/she ever laughed out loud without being tickled or touched?

- 1 ☐ yes
- 2 ☐ no
- 3 ☐ DK
- 4 ☐ Ref

D23. Has he/she ever held in one hand a moderate size object such as a block or a rattle?

- 5 ☐ yes
- 6 ☐ no
- 7 ☐ DK
- 8 ☐ Ref

D24. Has he/she ever rolled over on his/her own on purpose?

- 1 ☐ yes
- 2 ☐ no
- 3 ☐ DK
- 4 ☐ Ref

D25. Has (name of child participant) ever seemed to enjoy looking in the mirror at him/herself?

- 5 ☐ yes
- 6 ☐ no
- 7 ☐ DK
- 8 ☐ Ref

D26. Has (name of child participant) ever been pulled from a sitting to a standing position and supported his/her own weight with legs stretched out?

- 1 ☐ yes
- 2 ☐ no
- 3 ☐ DK

D27. Has (name of child participant) ever looked around with his/her eyes for a toy which was lost or not nearby?

- ⁵ ☐ yes
⁶ ☐ no
⁷ ☐ DK
⁸ ☐ Ref

D28. Has (name of child participant) ever sat alone with no help except for leaning forward on his/her hands or with just a little help from someone else?

- ¹ ☐ yes
² ☐ no
³ ☐ DK
⁴ ☐ Ref

D29. INTERVIEWER : refer to Question D2

If age is 0 to 3 months → ⁵ ☐ Go to Question D69

Otherwise → ⁶ ☐ Go to Question D30

D30. Has he/she ever sat for 10 minutes without any support at all?

- ¹ ☐ yes
² ☐ no
³ ☐ DK
⁴ ☐ Ref

D31. Has he/she ever pulled him/herself to a standing position without help from another person?

- ⁵ ☐ yes
⁶ ☐ no
⁷ ☐ DK
⁸ ☐ Ref

D32. Has (name of child participant) ever crawled when left lying on his/her stomach?

- ¹ ☐ yes
² ☐ no
³ ☐ DK
⁴ ☐ Ref

D33. Has he/she ever said any recognizable words such as "mama" or "dada"?

- ⁵ ☐ yes
⁶ ☐ no
⁷ ☐ DK
⁸ ☐ Ref

D34. Has he/she ever picked up small objects such as raisins or cookie crumbs, using only his/her thumb and first finger?

- ¹ ☐ yes
² ☐ no
³ ☐ DK
⁴ ☐ Ref

D35. Has (name of child participant) ever walked at least 2 steps with one hand held or holding on to something?

- ⁵ ☐ yes
⁶ ☐ no
⁷ ☐ DK
⁸ ☐ Ref

D36. Has (name of child participant) ever waved good-bye without help from another person?

- ¹ ☐ yes
² ☐ no
³ ☐ DK

D37. INTERVIEWER : Refer to Question D2

If age is 4 to 6 months → ¹ ☐ Go to Question D69

Otherwise, → ² ☐ Go to Question D38

D38. Has (name of child participant) ever shown by his/her behaviour that he/she knows the names of common objects when somebody else names them out loud?

- ¹ ☐ yes
² ☐ no
³ ☐ DK
⁴ ☐ Ref

D39. Has he/she ever shown that he/she wanted something by pointing, pulling, or making pleasant sounds rather than crying or whining?

- ⁵ ☐ yes
⁶ ☐ no
⁷ ☐ DK
⁸ ☐ Ref

D40. Has he/she ever stood alone on his/her feet for 10 seconds or more without holding on to anything or another person?

- ¹ ☐ yes
² ☐ no
³ ☐ DK
⁴ ☐ Ref

D41. Has (name of child participant) ever walked at least 2 steps without holding on to anything or another person?

- ⁵ ☐ yes
⁶ ☐ no
⁷ ☐ DK
⁸ ☐ Ref

D42. INTERVIEWER : Refer to Question D2

If age is 7 to 9 months → ³ ☐ Go to Question D69

Otherwise, → ⁴ ☐ Go to Question D43

D43. Has he/she ever crawled up at least 2 stairs or steps?

- ⁵ ☐ yes
⁶ ☐ no
⁷ ☐ DK
⁸ ☐ Ref

D44. Has he/she said two recognizable words besides "mama" or "dada"?

- ¹ ☐ yes
² ☐ no
³ ☐ DK
⁴ ☐ Ref

D45. Has (name of child participant) ever run?

- ⁵ ☐ yes
⁶ ☐ no
⁷ ☐ DK
⁸ ☐ Ref

D46. Has he/she ever said the name of a familiar object, such as a ball?

- ¹ ☐ yes
² ☐ no
³ ☐ DK
⁴ ☐ Ref

D47. Has he/she ever made a line with a crayon or pencil?

- ⁵ ☐ yes
⁶ ☐ no
⁷ ☐ DK
⁸ ☐ Ref

D48. Did he/she ever walk up at least 2 stairs with one hand held or holding the railing?

- ¹ ☐ yes
² ☐ no
³ ☐ DK
⁴ ☐ Ref

D49. INTERVIEWER : Refer to Question D2

If age is 10 to 12 months

→ ⁵ ☐ Go to Question D69

Otherwise,

→ ⁶ ☐ Go to Question D50

D50. Has he/she ever fed him/herself with a spoon or fork without spilling much?

- ¹ ☐ yes
² ☐ no
³ ☐ DK
⁴ ☐ Ref

D51. Has (name of child participant) ever let someone know, without crying, that wearing wet (soiled) pants or diapers bothered him/her?

- ⁵ ☐ yes
⁶ ☐ no
⁷ ☐ DK
⁸ ☐ Ref

D52. Has he/she ever spoken a partial sentence of 3 words or more?

- ¹ ☐ yes
² ☐ no
³ ☐ DK
⁴ ☐ Ref

D53. Has (name of child participant) ever walked up stairs by him/herself without holding on to a rail?

- ⁵ ☐ yes
⁶ ☐ no
⁷ ☐ DK
⁸ ☐ Ref

D54. INTERVIEWER : Refer to Question D2

If age is 13 to 15 months

→ ¹ ☐ Go to Question D69

Otherwise

→ ² ☐ Go to Question D50

D55. Has he/she ever washed and dried his/her hands without any help except for someone turning the water on and off?

- ¹ ☐ yes
² ☐ no
³ ☐ DK
⁴ ☐ Ref

D56. Has he/she ever counted 3 objects correctly?

- ⁵ ☐ yes
⁶ ☐ no
⁷ ☐ DK
⁸ ☐ Ref

D57. Has he/she ever gone to the toilet alone?

- ¹ ☐ yes
² ☐ no
³ ☐ DK
⁴ ☐ Ref

D58. Has he/she ever walked upstairs by him/herself with no help, stepping on each step with only one foot?

- ⁵ ☐ yes
⁶ ☐ no
⁷ ☐ DK
⁸ ☐ Ref

D59. INTERVIEWER : Refer to Question D2

If age is 16 to 18 months

→ ¹ ☐ Go to Question D69

Otherwise,

→ ² ☐ Go to Question D60

D60. Does (name of child participant) know his/her own age and sex?

- ⁵ ☐ yes
⁶ ☐ no
⁷ ☐ DK
⁸ ☐ Ref

D61. Has he/she ever said the names of at least 4 colours?

- ¹ ☐ yes
² ☐ no
³ ☐ DK
⁴ ☐ Ref

D62. Has he/she ever pedalled a tricycle at least 10 feet?

- ⁵ ☐ yes
⁶ ☐ no
⁷ ☐ DK
⁸ ☐ Ref

D63. INTERVIEWER : Refer to Question D2

If age is 19 to 21 months

→ ³ ☐ Go to Question D69

Otherwise,

→ ⁴ ☐ Go to Question D64

D64. Has he/she ever done a somersault without help from anybody?

- ⁵ ☐ yes
⁶ ☐ no
⁷ ☐ DK

D65. Has he/she ever dressed him/herself without any help except for tying shoes (and buttoning the backs of dresses)?

- 1 ☐ yes
2 ☐ no
3 ☐ DK
4 ☐ Rel

D67. Has he/she ever counted out loud up to 10?

- 01 ☐ yes
02 ☐ no
03 ☐ DK
04 ☐ Rel

D66. Has he/she ever said his/her first and last name together without someone's help? (Nickname may be used for first name.)

- 5 ☐ yes
6 ☐ no
7 ☐ DK
8 ☐ Rel

→ Go to Question D67

D68. Has he/she ever drawn a picture of a man or woman with at least 2 parts of the body besides a head?

- 05 ☐ yes
06 ☐ no
07 ☐ DK
08 ☐ Rel

D69. INTERVIEWER : show respondent page 2 of response booklet. Next are statements about what it feels like to be a parent. Please tell me if you strongly agree, agree, disagree, or strongly disagree.

	strongly agree	agree	disagree	strongly disagree	DK	Rel
a) It seems like you are so busy as a parent that you never get anything done	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>	06 <input type="radio"/>
b) Parenting leaves you feeling drained and exhausted	07 <input type="radio"/>	08 <input type="radio"/>	09 <input type="radio"/>	10 <input type="radio"/>	11 <input type="radio"/>	12 <input type="radio"/>
c) You feel like you are doing a good job as a parent	13 <input type="radio"/>	14 <input type="radio"/>	15 <input type="radio"/>	16 <input type="radio"/>	17 <input type="radio"/>	18 <input type="radio"/>
d) Being a parent makes you tense and anxious	19 <input type="radio"/>	20 <input type="radio"/>	21 <input type="radio"/>	22 <input type="radio"/>	23 <input type="radio"/>	24 <input type="radio"/>
e) It's hard to know whether you are doing a good job or a bad job as a parent	25 <input type="radio"/>	26 <input type="radio"/>	27 <input type="radio"/>	28 <input type="radio"/>	29 <input type="radio"/>	30 <input type="radio"/>
f) Being a parent is as satisfying as you expected	31 <input type="radio"/>	32 <input type="radio"/>	33 <input type="radio"/>	34 <input type="radio"/>	35 <input type="radio"/>	36 <input type="radio"/>

D70. INTERVIEWER : show respondent page 3 of response booklet. The following questions have to do with things that (name of child participant) does and ways that you react to him/her. The responses are never, about once a week or less, a few times a week, one or two times a day, many times each day.

	never	about once a week or less	a few times a week	one or two times a day	many times each day	DK	Rel
a) How often do you praise him/her by saying something like "Good for you!" or "What a nice thing you did!" or "That's good going"?	37 <input type="radio"/>	38 <input type="radio"/>	39 <input type="radio"/>	40 <input type="radio"/>	41 <input type="radio"/>	42 <input type="radio"/>	43 <input type="radio"/>
b) How often do you and he/she talk or play with each other, focusing attention on each other for five minutes or more, just for fun?	44 <input type="radio"/>	45 <input type="radio"/>	46 <input type="radio"/>	47 <input type="radio"/>	48 <input type="radio"/>	49 <input type="radio"/>	50 <input type="radio"/>
c) How often do you and he/she laugh together?	51 <input type="radio"/>	52 <input type="radio"/>	53 <input type="radio"/>	54 <input type="radio"/>	55 <input type="radio"/>	56 <input type="radio"/>	57 <input type="radio"/>
d) How often do you tell stories or legends to him/her?	58 <input type="radio"/>	59 <input type="radio"/>	60 <input type="radio"/>	61 <input type="radio"/>	62 <input type="radio"/>	63 <input type="radio"/>	64 <input type="radio"/>
e) How often do you tell him/her that he/she is bad or not as good as others?	65 <input type="radio"/>	66 <input type="radio"/>	67 <input type="radio"/>	68 <input type="radio"/>	69 <input type="radio"/>	70 <input type="radio"/>	71 <input type="radio"/>
f) How often do you do something special with him/her that he/she enjoys?	72 <input type="radio"/>	73 <input type="radio"/>	74 <input type="radio"/>	75 <input type="radio"/>	76 <input type="radio"/>	77 <input type="radio"/>	78 <input type="radio"/>
g) How often do you play sports, hobbies or games with him/her?	79 <input type="radio"/>	80 <input type="radio"/>	81 <input type="radio"/>	82 <input type="radio"/>	83 <input type="radio"/>	84 <input type="radio"/>	85 <input type="radio"/>

D71. INTERVIEWER :

If age of child participant is 0 to 23 months

→ 1 ☐ Go to Question F1

Otherwise

→ 2 ☐ Go to Question D72

D72

INTERVIEWER : show respondent page 4 of response booklet. Now, we know that when parents spend time together with their children, some of the time things go well and some of the time they don't go well. For the following questions, I would like you to tell me what proportion of the time things turn out in different ways, whether it is never, less than half the time, about half the time, more than half the time or all the time.

	never	less than half the time	about half the time	more than half the time	all the time	DK	Ref
a) Of all the times that you talk to (name of child participant) about his/her behaviour, what proportion is praise?	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>	06 <input type="radio"/>	07 <input type="radio"/>
b) Of all the times that you talk to him/her about his/her behaviour, what proportion is disapproval?	08 <input type="radio"/>	09 <input type="radio"/>	10 <input type="radio"/>	11 <input type="radio"/>	12 <input type="radio"/>	13 <input type="radio"/>	14 <input type="radio"/>
c) How often do you get angry when you punish him/her?	15 <input type="radio"/>	16 <input type="radio"/>	17 <input type="radio"/>	18 <input type="radio"/>	19 <input type="radio"/>	20 <input type="radio"/>	21 <input type="radio"/>
d) How often do you think that the kind of punishment you give him/her depends on your mood?	22 <input type="radio"/>	23 <input type="radio"/>	24 <input type="radio"/>	25 <input type="radio"/>	26 <input type="radio"/>	27 <input type="radio"/>	28 <input type="radio"/>
e) How often do you feel you are having problems managing him/her in general?	29 <input type="radio"/>	30 <input type="radio"/>	31 <input type="radio"/>	32 <input type="radio"/>	33 <input type="radio"/>	34 <input type="radio"/>	35 <input type="radio"/>
f) When you discipline him/her, how often does he/she ignore the punishment?	36 <input type="radio"/>	37 <input type="radio"/>	38 <input type="radio"/>	39 <input type="radio"/>	40 <input type="radio"/>	41 <input type="radio"/>	42 <input type="radio"/>
g) How often do you have to discipline him/her repeatedly for the same thing?	43 <input type="radio"/>	44 <input type="radio"/>	45 <input type="radio"/>	46 <input type="radio"/>	47 <input type="radio"/>	48 <input type="radio"/>	49 <input type="radio"/>

Section E: School, relationships and behaviour

E1. The next few questions are about (name of child participant)'s school experiences, relationships and behaviour. Does he/she go to school? (Include home schooling)

- 1 ☐ yes → Go to Question E6
 2 ☐ no → Go to Question E2
 3 ☐ DK → Go to Question E11
 4 ☐ Ref → Go to Question E11

E2. Why doesn't he/she go to school? (Mark one only.)

- 5 ☐ too young
 6 ☐ something else (specify) _____
 7 ☐ DK
 8 ☐ Ref

E3. Does (name of child participant) attend any nursery school, play group, child care centre, or other early childhood program or activity?

- 1 ☐ yes → Go to Question E4
 2 ☐ no
 3 ☐ DK → Go to Question E11
 4 ☐ Ref

E4. In general, how satisfied are you with the quality of the program? Would you say...

- 01 ☐ Very satisfied
 02 ☐ Satisfied
 03 ☐ Dissatisfied
 04 ☐ Very dissatisfied → Go to Question E5
 05 ☐ DK
 06 ☐ Ref

E5. **INTERVIEWER :** show respondent page 5 of response booklet. During the past 6 months, how well has (name of child participant) gotten along with his/her leaders or teachers in the program? Would you say...

- 1 ☐ Very well, no problems
 2 ☐ Quite well, hardly any problems
 3 ☐ Pretty well, occasional problems
 4 ☐ Not too well, frequent problems
 5 ☐ Not well at all, constant problems
 6 ☐ DK
 7 ☐ Ref

Go to
Question
E11

E6. What school grade is (name of child participant) in?

- 01 ☐ junior kindergarten
 02 ☐ kindergarten
 03 ☐ grade 1
 04 ☐ grade 2
 05 ☐ grade 3
 06 ☐ grade 4
 07 ☐ grade 5
 08 ☐ grade 6
 09 ☐ grade 7 (in Quebec = Secondary I)
 10 ☐ grade 8 (in Quebec = Secondary II)
 11 ☐ grade 9 (in Quebec = Secondary III)
 12 ☐ ungraded
 13 ☐ DK
 14 ☐ Ref

E7. Based on your knowledge of his/her school work, including his/her report cards, how is (name of child participant) doing overall at school. Would you say...

- 1 ☐ very well
 2 ☐ well
 3 ☐ average
 4 ☐ poorly
 5 ☐ very poorly
 6 ☐ DK

<p>E9. Does (name of child participant) receive special education because a physical, emotional, behaviour or other problem limits the kind or amount of school work he/she can do?</p> <p>1 <input type="radio"/> yes</p> <p>2 <input type="radio"/> no</p> <p>3 <input type="radio"/> DK</p> <p>4 <input type="radio"/> Rel</p>	<p>E11. During the past 6 months, how well has he/she gotten along with other kids such as friends or classmates (excluding brothers and sisters)?</p> <p>01 <input type="radio"/> Very well, no problems</p> <p>02 <input type="radio"/> Quite well, hardly any problems</p> <p>03 <input type="radio"/> Pretty well, occasional problems</p> <p>04 <input type="radio"/> Not too well, frequent problems</p> <p>05 <input type="radio"/> Not well at all, constant problems</p> <p>06 <input type="radio"/> DK</p> <p>07 <input type="radio"/> Rel</p>
<p>E9. In general, how satisfied are you with the education (name of child participant) is receiving? Would you say...</p> <p>01 <input type="radio"/> very satisfied</p> <p>02 <input type="radio"/> satisfied</p> <p>03 <input type="radio"/> dissatisfied</p> <p>04 <input type="radio"/> very dissatisfied</p> <p>05 <input type="radio"/> DK</p> <p>06 <input type="radio"/> Rel</p>	<p>E12. During the past 6 months, how well has he/she gotten along with his/her parent(s)?</p> <p>1 <input type="radio"/> Very well, no problems</p> <p>2 <input type="radio"/> Quite well, hardly any problems</p> <p>3 <input type="radio"/> Pretty well, occasional problems</p> <p>4 <input type="radio"/> Not too well, frequent problems</p> <p>5 <input type="radio"/> Not well at all, constant problems</p> <p>6 <input type="radio"/> DK</p> <p>7 <input type="radio"/> Rel</p>
<p>E10. INTERVIEWER : show respondent page 5 of response booklet. Since starting school in the fall, how well has (name of child participant) gotten along with his/her teachers at school? Would you say...</p> <p>1 <input type="radio"/> Very well, no problems</p> <p>2 <input type="radio"/> Quite well, hardly any problems</p> <p>3 <input type="radio"/> Pretty well, occasional problems</p> <p>4 <input type="radio"/> Not too well, frequent problems</p> <p>5 <input type="radio"/> Not well at all, constant problems</p> <p>6 <input type="radio"/> DK</p> <p>7 <input type="radio"/> Rel</p>	<p>E13. During the past 6 months, how well has (name of child participant) gotten along with his/her brother(s)/ sister(s)?</p> <p>01 <input type="radio"/> Very well, no problems</p> <p>02 <input type="radio"/> Quite well, hardly any problems</p> <p>03 <input type="radio"/> Pretty well, occasional problems</p> <p>04 <input type="radio"/> Not too well, frequent problems</p> <p>05 <input type="radio"/> Not well at all, constant problems</p> <p>06 <input type="radio"/> Not applicable</p> <p>07 <input type="radio"/> DK</p> <p>08 <input type="radio"/> Rel</p>

Go to
Question
E11

E14. INTERVIEWER : show respondent page 6 of response booklet.
Now I'd like to ask you questions about how (name of child participant) seems to feel or act. We know that all kids have their ups and downs. For each statement, please tell me if it's never or not true, sometimes or somewhat true, often or very true, DK, or Rel.

	never or not true	sometimes or somewhat true	often or very true	DK	Rel
a) Can't sit still, is restless or hyperactive	001 <input type="radio"/>	002 <input type="radio"/>	003 <input type="radio"/>	004 <input type="radio"/>	005 <input type="radio"/>
b) Destroys his/her own things	006 <input type="radio"/>	007 <input type="radio"/>	008 <input type="radio"/>	009 <input type="radio"/>	010 <input type="radio"/>
c) Will try to help someone who has been hurt	011 <input type="radio"/>	012 <input type="radio"/>	013 <input type="radio"/>	014 <input type="radio"/>	015 <input type="radio"/>
d) Steals at home	016 <input type="radio"/>	017 <input type="radio"/>	018 <input type="radio"/>	019 <input type="radio"/>	020 <input type="radio"/>
e) Seems to be unhappy, sad or depressed	021 <input type="radio"/>	022 <input type="radio"/>	023 <input type="radio"/>	024 <input type="radio"/>	025 <input type="radio"/>
f) Gets into many fights	026 <input type="radio"/>	027 <input type="radio"/>	028 <input type="radio"/>	029 <input type="radio"/>	030 <input type="radio"/>
g) Volunteers to help clear up a mess someone else has made	031 <input type="radio"/>	032 <input type="radio"/>	033 <input type="radio"/>	034 <input type="radio"/>	035 <input type="radio"/>
h) Is distractible, has trouble sticking to any activity	036 <input type="radio"/>	037 <input type="radio"/>	038 <input type="radio"/>	039 <input type="radio"/>	040 <input type="radio"/>
i) Is not as happy as other children	041 <input type="radio"/>	042 <input type="radio"/>	043 <input type="radio"/>	044 <input type="radio"/>	045 <input type="radio"/>
j) Destroys things belonging to his/her family or other children	046 <input type="radio"/>	047 <input type="radio"/>	048 <input type="radio"/>	049 <input type="radio"/>	050 <input type="radio"/>
k) If there is a quarrel or dispute, will try to stop it	051 <input type="radio"/>	052 <input type="radio"/>	053 <input type="radio"/>	054 <input type="radio"/>	055 <input type="radio"/>
l) Fidgets	056 <input type="radio"/>	057 <input type="radio"/>	058 <input type="radio"/>	059 <input type="radio"/>	060 <input type="radio"/>
m) Is disobedient at school	061 <input type="radio"/>	062 <input type="radio"/>	063 <input type="radio"/>	064 <input type="radio"/>	065 <input type="radio"/>
n) Can't concentrate, can't pay attention for long	066 <input type="radio"/>	067 <input type="radio"/>	068 <input type="radio"/>	069 <input type="radio"/>	070 <input type="radio"/>
o) Is too fearful or anxious	071 <input type="radio"/>	072 <input type="radio"/>	073 <input type="radio"/>	074 <input type="radio"/>	075 <input type="radio"/>
p) Is impulsive, acts without thinking	076 <input type="radio"/>	077 <input type="radio"/>	078 <input type="radio"/>	079 <input type="radio"/>	080 <input type="radio"/>

(Continued from previous page)

	never or not true	sometimes or somewhat true	often or very true	DK	Ref
q) Tells lies or cheats	081 <input type="radio"/>	082 <input type="radio"/>	083 <input type="radio"/>	084 <input type="radio"/>	085 <input type="radio"/>
r) Offers to help other children (friend, brother or sister) who are having difficulty with a task	086 <input type="radio"/>	087 <input type="radio"/>	088 <input type="radio"/>	089 <input type="radio"/>	090 <input type="radio"/>
s) Is worried	091 <input type="radio"/>	092 <input type="radio"/>	093 <input type="radio"/>	094 <input type="radio"/>	095 <input type="radio"/>
t) Has difficulty awaiting turn in games or groups	096 <input type="radio"/>	097 <input type="radio"/>	098 <input type="radio"/>	099 <input type="radio"/>	100 <input type="radio"/>
u) Physically attacks people	101 <input type="radio"/>	102 <input type="radio"/>	103 <input type="radio"/>	104 <input type="radio"/>	105 <input type="radio"/>
v) Comforts a child (friend, brother or sister) who is crying	106 <input type="radio"/>	107 <input type="radio"/>	108 <input type="radio"/>	109 <input type="radio"/>	110 <input type="radio"/>
w) Cries a lot	111 <input type="radio"/>	112 <input type="radio"/>	113 <input type="radio"/>	114 <input type="radio"/>	115 <input type="radio"/>
x) Vandalizes	116 <input type="radio"/>	117 <input type="radio"/>	118 <input type="radio"/>	119 <input type="radio"/>	120 <input type="radio"/>
y) Threatens people	121 <input type="radio"/>	122 <input type="radio"/>	123 <input type="radio"/>	124 <input type="radio"/>	125 <input type="radio"/>
z) Is cruel, bullies or is mean to others	126 <input type="radio"/>	127 <input type="radio"/>	128 <input type="radio"/>	129 <input type="radio"/>	130 <input type="radio"/>
aa) Is nervous, highstrung or tense	131 <input type="radio"/>	132 <input type="radio"/>	133 <input type="radio"/>	134 <input type="radio"/>	135 <input type="radio"/>
bb) Will invite bystanders to join in a game	136 <input type="radio"/>	137 <input type="radio"/>	138 <input type="radio"/>	139 <input type="radio"/>	140 <input type="radio"/>
cc) Steals outside the home	141 <input type="radio"/>	142 <input type="radio"/>	143 <input type="radio"/>	144 <input type="radio"/>	145 <input type="radio"/>
dd) Has trouble enjoying him/herself	146 <input type="radio"/>	147 <input type="radio"/>	148 <input type="radio"/>	149 <input type="radio"/>	150 <input type="radio"/>
ee) Takes the opportunity to praise the work of less able children	151 <input type="radio"/>	152 <input type="radio"/>	153 <input type="radio"/>	154 <input type="radio"/>	155 <input type="radio"/>

SECTION F: Respondent's Health, Feelings and Support

F1. The following questions ask about your general health and smoking habits. If there are any questions you do not wish to answer, please let me know and we'll skip over them. In general, would you say your health is...

- 1 ☐ excellent
 2 ☐ very good
 3 ☐ good
 4 ☐ fair
 5 ☐ poor
 6 ☐ DK
 7 ☐ Ref

F2. At the present time do you smoke cigarettes daily, occasionally or not at all?

- 01 ☐ daily → Go to Question F3
 02 ☐ occasionally
 03 ☐ not at all → Go to Question F4
 04 ☐ DK
 05 ☐ Ref

F3. How many cigarettes do you smoke each day now?

- cigarettes
 98 ☐ DK
 99 ☐ Ref

F4. Does anyone else living in your household smoke cigarettes?

- 1 ☐ yes
 2 ☐ no
 3 ☐ DK

F5. Now, some questions about alcohol consumption. During the past 12 months, have you had a drink of beer, wine, liquor or any other alcoholic beverage?

- 5 ☐ yes → Go to Question F6
 6 ☐ no → Go to Question F9
 7 ☐ Ref

F6. During the past 12 months, how often did you drink alcoholic beverages? Would you say...

- 1 ☐ every day
 2 ☐ 4-6 times a week
 3 ☐ 2-3 times a week
 4 ☐ once a week
 5 ☐ 2-3 times a month
 6 ☐ once a month
 7 ☐ less than once a month
 8 ☐ DK
 9 ☐ Ref → Go to Question F9

F7. How many times in the past 12 months have you had 5 or more drinks on one occasion?

- times
 998 ☐ DK
 999 ☐ Ref

F8. When was the last time you had a drink? Would you say...

- 1 ☐ within the last week
 2 ☐ about 1-4 weeks ago
 3 ☐ about 1-6 months ago
 4 ☐ more than 6 months ago
 5 ☐ DK

F9. INTERVIEWER : *show respondent page 7 of response booklet.)*

The next statements describe feelings or behaviours. For each one, please tell me how often you felt or behaved this way during the past week. The responses are rarely or none of the time (less than 1 day), some or a little of the time (1-2 days), occasionally or a moderate amount of time (3-4 days), and most or all of the time (5-7 days).

	rarely or none of the time (less than 1 day)	some or a little of the time (1-2 days)	occasionally or a moderate amount of time (3-4 days)	most or all of the time (5-7 days)	DK	Ref
a) During the past week, I did not feel like eating; my appetite was poor	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>	06 <input type="radio"/>
b) I felt that I could not shake off the blues even with help from my family or friends	07 <input type="radio"/>	08 <input type="radio"/>	09 <input type="radio"/>	10 <input type="radio"/>	11 <input type="radio"/>	12 <input type="radio"/>
c) I had trouble keeping my mind on what I was doing	13 <input type="radio"/>	14 <input type="radio"/>	15 <input type="radio"/>	16 <input type="radio"/>	17 <input type="radio"/>	18 <input type="radio"/>
d) I felt depressed	19 <input type="radio"/>	20 <input type="radio"/>	21 <input type="radio"/>	22 <input type="radio"/>	23 <input type="radio"/>	24 <input type="radio"/>
e) I felt that everything I did was an effort	25 <input type="radio"/>	26 <input type="radio"/>	27 <input type="radio"/>	28 <input type="radio"/>	29 <input type="radio"/>	30 <input type="radio"/>
f) I felt hopeful about the future	31 <input type="radio"/>	32 <input type="radio"/>	33 <input type="radio"/>	34 <input type="radio"/>	35 <input type="radio"/>	36 <input type="radio"/>
g) My sleep was restless	37 <input type="radio"/>	38 <input type="radio"/>	39 <input type="radio"/>	40 <input type="radio"/>	41 <input type="radio"/>	42 <input type="radio"/>
h) I was happy	43 <input type="radio"/>	44 <input type="radio"/>	45 <input type="radio"/>	46 <input type="radio"/>	47 <input type="radio"/>	48 <input type="radio"/>
i) I felt lonely	49 <input type="radio"/>	50 <input type="radio"/>	51 <input type="radio"/>	52 <input type="radio"/>	53 <input type="radio"/>	54 <input type="radio"/>
j) I enjoyed life	55 <input type="radio"/>	56 <input type="radio"/>	57 <input type="radio"/>	58 <input type="radio"/>	59 <input type="radio"/>	60 <input type="radio"/>
k) I had crying spells	61 <input type="radio"/>	62 <input type="radio"/>	63 <input type="radio"/>	64 <input type="radio"/>	65 <input type="radio"/>	66 <input type="radio"/>
l) I felt that people disliked me	67 <input type="radio"/>	68 <input type="radio"/>	69 <input type="radio"/>	70 <input type="radio"/>	71 <input type="radio"/>	72 <input type="radio"/>

F10. INTERVIEWER :

*For female respondents
check here*

1 ☐ → Go to Question F11

*For male respondents
check here*

2 ☐ → Go to Question F42

F11. These next questions are about pregnancy experiences and support. Are you pregnant or expecting a baby?

1 ☐ yes → Go to Question F12

2 ☐ no

3 ☐ DK → Go to Question F17A

4 ☐ Ref

F12. Do you know your due date?

Day Month Year

1 ☐ yes → → Go to Question F14

2 ☐ no → Go to Question F13

3 ☐ Ref → Go to Question F14

F13. Do you know which trimester you are in?

4 ☐ yes – 1st trimester (one to three months)

5 ☐ yes – 2nd trimester (four to six months)

6 ☐ yes – 3rd trimester (seven to nine months)

7 ☐ no

8 ☐ DK

9 ☐ Ref

F14. From whom do you receive pre-natal care? (Do not read list. Mark one only.)

01 ☐ a doctor

02 ☐ a nurse

03 ☐ a midwife

04 ☐ other

05 ☐ nobody

06 ☐ DK

→ Go to Question F15

→ Go to Question F16

F15. Is this care sensitive to your culture and traditions?

1 ☐ yes

2 ☐ no

3 ☐ DK

4 ☐ Ref

F16. Do you plan to breast feed your baby after birth?

5 ☐ yes

6 ☐ no

7 ☐ DK

8 ☐ Ref

F17A. INTERVIEWER :

*if the respondent
is childless* → 1 ☐ Go to Question F40

otherwise → 2 ☐ Go to Question F17B

F17B. Just to reconfirm, are you (name of child participant)'s birth mother? (i.e. Did you give birth to him/her?)

3 ☐ yes → Go to Question F18

4 ☐ no

5 ☐ Ref → Go to Question F40

F18. During the pregnancy with (name of child participant) did you suffer from any of the following?

yes no DK Ref

a) pregnancy diabetes 01 ☐ 02 ☐ 03 ☐ 04 ☐

b) high blood pressure 05 ☐ 06 ☐ 07 ☐ 08 ☐

c) other physical problems 09 ☐ 10 ☐ 11 ☐ 12 ☐

F19. From whom did you receive pre-natal care? (Do not read list. Mark one only.)

- ☐ 1 a doctor
- ☐ 2 a nurse
- ☐ 3 a midwife
- ☐ 4 other
- ☐ 5 nobody
- ☐ 6 DK
- ☐ 7 Ref

→ Go to Question F20

→ Go to Question F21

F20. At what stage in your pregnancy did you go for pre-natal care? (Mark all that apply.)

- ☐ 1 during the 1st trimester (one to three months)
- ☐ 2 during the 2nd trimester (four to six months)
- ☐ 3 during the 3rd trimester (seven to nine months)
- ☐ 4 DK
- ☐ 5 Ref

F21. What was your heaviest weight during your pregnancy with (name of child participant)?

1 kilograms
or

2 pounds

☐ 3 DK

☐ 4 Ref

F22. How much did you weigh before becoming pregnant?

5 kilograms
or

6 pounds

☐ 7 DK

☐ 8 Ref

→ Go to Question F24

F23. How tall are you?

1 centimetres
or

2 feet 3 inches

☐ 4 DK

☐ 5 Ref

F24. Did you smoke during your pregnancy with (name of child participant)?

☐ 1 yes

☐ 2 no

☐ 3 Ref

→ Go to Question F27

F25. How many cigarettes per day did you smoke during the pregnancy with (name of child participant)?

cigarettes

☐ 98 DK

☐ 99 Ref

→ Go to Question F27

F26. At what stage in your pregnancy did you smoke this amount? (Mark all that apply)

- ☐ 1 during the 1st trimester (one to three months)
- ☐ 2 during the 2nd trimester (four to six months)
- ☐ 3 during the 3rd trimester (seven to nine months)
- ☐ 4 DK

F27. How frequently did you consume alcohol during your pregnancy with (name of child participant)? Would you say...

☐ 01 never → Go to Question F30

☐ 02 less than once a month

☐ 03 1-3 times a month

☐ 04 once a week

☐ 05 2-3 times a week

☐ 06 4-6 times a week

☐ 07 everyday

☐ 08 DK

☐ 09 Ref

→ Go to Question F30

F28. On the days when you drank, how many drinks did you usually have?

☐ 1 1 to 2 drinks

☐ 2 3 to 4 drinks

☐ 3 5 or more drinks

☐ 4 DK

☐ 5 Ref → Go to Question F30

F29. At what stage in your pregnancy did you consume this quantity? (Mark all that apply)

☐ 01 during the 1st trimester (one to three months)

☐ 02 during the 2nd trimester (four to six months)

☐ 03 during the 3rd trimester (seven to nine months)

☐ 04 DK

☐ 05 Ref

F30. The following are questions concerning (name of child participant)'s birth. Was this a single birth, twins or triplets?

☐ 1 single birth

☐ 2 twins

☐ 3 triplets

☐ 4 more than triplets

☐ 5 DK

☐ 6 Ref

F31. What was (name of child participant)'s birth weight?

1 . 2 kilograms

or

3 pounds 4 ounces

☐ 5 DK

☐ 6 Ref

F32. Was (name of child participant) born before or after the due date?

☐ 1 before

☐ 2 after

☐ 3 no

☐ 4 DK

→ Go to Question F33

→ Go to Question F34

F32. How many days or weeks (before/after) the due date was he/she born? <div style="display: flex; align-items: center; gap: 10px;"> <div style="border: 1px solid black; width: 40px; height: 20px; display: flex; align-items: center; justify-content: center;">1</div> <div>days</div> <div>or</div> <div style="border: 1px solid black; width: 40px; height: 20px; display: flex; align-items: center; justify-content: center;">2</div> <div>weeks</div> </div> <div style="margin-top: 10px;"> ³ <input type="radio"/> DK ⁴ <input type="radio"/> Ref </div>	F37. Compared to other babies in general, would you say that (name of child participant)'s health at birth was... <div style="margin-top: 10px;"> ¹ <input type="radio"/> excellent ² <input type="radio"/> very good ³ <input type="radio"/> good ⁴ <input type="radio"/> fair ⁵ <input type="radio"/> poor ⁶ <input type="radio"/> DK ⁷ <input type="radio"/> Ref </div>
F34. Did this child receive special medical care following birth? <div style="margin-top: 10px;"> ¹ <input type="radio"/> yes → Go to Question F35 ² <input type="radio"/> no ³ <input type="radio"/> DK ⁴ <input type="radio"/> Ref </div>	F38. Did you ever breast feed (name of child participant)? <div style="margin-top: 10px;"> ⁰¹ <input type="radio"/> yes → Go to Question F39 ⁰² <input type="radio"/> no ⁰³ <input type="radio"/> DK ⁰⁴ <input type="radio"/> Ref </div>
F35. What type of special medical care was received? (Mark all that apply.) <div style="margin-top: 10px;"> ⁰¹ <input type="radio"/> intensive care ⁰² <input type="radio"/> ventilation/oxygen ⁰³ <input type="radio"/> transfer to a specialized hospital ⁰⁴ <input type="radio"/> other ⁰⁵ <input type="radio"/> DK ⁰⁶ <input type="radio"/> Ref </div>	F39. For how long? (Do not read list. Mark one only) <div style="margin-top: 10px;"> ¹ <input type="radio"/> less than one week ² <input type="radio"/> 1-4 weeks ³ <input type="radio"/> 5-8 weeks ⁴ <input type="radio"/> 9-12 weeks ⁵ <input type="radio"/> 3-6 months ⁶ <input type="radio"/> 7-9 months ⁷ <input type="radio"/> more than 9 months ⁸ <input type="radio"/> DK ⁹ <input type="radio"/> Ref </div>
F36. For how many days, in total, was this care received? <div style="margin-top: 10px;"> <div style="border: 1px solid black; width: 60px; height: 20px; display: flex; align-items: center; justify-content: center;"> <div style="width: 20px; height: 20px; border: 1px solid black;"></div> <div style="width: 20px; height: 20px; border: 1px solid black;"></div> <div style="width: 20px; height: 20px; border: 1px solid black;"></div> </div> <div>days</div> </div> <div style="margin-top: 10px;"> ⁹⁹⁸ <input type="radio"/> DK ⁹⁹⁹ <input type="radio"/> Ref </div>	F40. How many times throughout your life have you been pregnant including any pregnancies which did not go full term? Include pregnancy with (name of child participant) include current pregnancy if pregnant. <div style="margin-top: 10px;"> <div style="border: 1px solid black; width: 40px; height: 20px; display: flex; align-items: center; justify-content: center;"> <div style="width: 20px; height: 20px; border: 1px solid black;"></div> <div style="width: 20px; height: 20px; border: 1px solid black;"></div> </div> <div>times</div> </div>
F41. How many live births have you had? <div style="margin-top: 10px;"> <div style="border: 1px solid black; width: 40px; height: 20px; display: flex; align-items: center; justify-content: center;"> <div style="width: 20px; height: 20px; border: 1px solid black;"></div> <div style="width: 20px; height: 20px; border: 1px solid black;"></div> </div> <div>child(ren)</div> </div>	

F42. INTERVIEWER : show respondent page 8 of response booklet. Next are statements about feelings you may or may not have. For each one, please tell me if you strongly agree, agree, disagree, or strongly disagree.	<table style="width: 100%; text-align: center;"> <tr> <th style="width: 12.5%;">strongly agree</th> <th style="width: 12.5%;">agree</th> <th style="width: 12.5%;">disagree</th> <th style="width: 12.5%;">strongly disagree</th> <th style="width: 12.5%;">DK</th> <th style="width: 12.5%;">Ref</th> </tr> </table>	strongly agree	agree	disagree	strongly disagree	DK	Ref
strongly agree	agree	disagree	strongly disagree	DK	Ref		
a) I have little control over the things that happen to me	<table style="width: 100%; text-align: center;"> <tr> <td>⁰¹ <input type="radio"/></td> <td>⁰² <input type="radio"/></td> <td>⁰³ <input type="radio"/></td> <td>⁰⁴ <input type="radio"/></td> <td>⁰⁵ <input type="radio"/></td> <td>⁰⁶ <input type="radio"/></td> </tr> </table>	⁰¹ <input type="radio"/>	⁰² <input type="radio"/>	⁰³ <input type="radio"/>	⁰⁴ <input type="radio"/>	⁰⁵ <input type="radio"/>	⁰⁶ <input type="radio"/>
⁰¹ <input type="radio"/>	⁰² <input type="radio"/>	⁰³ <input type="radio"/>	⁰⁴ <input type="radio"/>	⁰⁵ <input type="radio"/>	⁰⁶ <input type="radio"/>		
b) Sometimes I feel that I'm being pushed around in life	<table style="width: 100%; text-align: center;"> <tr> <td>⁰⁷ <input type="radio"/></td> <td>⁰⁸ <input type="radio"/></td> <td>⁰⁹ <input type="radio"/></td> <td>¹⁰ <input type="radio"/></td> <td>¹¹ <input type="radio"/></td> <td>¹² <input type="radio"/></td> </tr> </table>	⁰⁷ <input type="radio"/>	⁰⁸ <input type="radio"/>	⁰⁹ <input type="radio"/>	¹⁰ <input type="radio"/>	¹¹ <input type="radio"/>	¹² <input type="radio"/>
⁰⁷ <input type="radio"/>	⁰⁸ <input type="radio"/>	⁰⁹ <input type="radio"/>	¹⁰ <input type="radio"/>	¹¹ <input type="radio"/>	¹² <input type="radio"/>		
c) What happens to me in the future mostly depends on me	<table style="width: 100%; text-align: center;"> <tr> <td>¹³ <input type="radio"/></td> <td>¹⁴ <input type="radio"/></td> <td>¹⁵ <input type="radio"/></td> <td>¹⁶ <input type="radio"/></td> <td>¹⁷ <input type="radio"/></td> <td>¹⁸ <input type="radio"/></td> </tr> </table>	¹³ <input type="radio"/>	¹⁴ <input type="radio"/>	¹⁵ <input type="radio"/>	¹⁶ <input type="radio"/>	¹⁷ <input type="radio"/>	¹⁸ <input type="radio"/>
¹³ <input type="radio"/>	¹⁴ <input type="radio"/>	¹⁵ <input type="radio"/>	¹⁶ <input type="radio"/>	¹⁷ <input type="radio"/>	¹⁸ <input type="radio"/>		
d) I often feel helpless in dealing with the problems of life	<table style="width: 100%; text-align: center;"> <tr> <td>¹⁹ <input type="radio"/></td> <td>²⁰ <input type="radio"/></td> <td>²¹ <input type="radio"/></td> <td>²² <input type="radio"/></td> <td>²³ <input type="radio"/></td> <td>²⁴ <input type="radio"/></td> </tr> </table>	¹⁹ <input type="radio"/>	²⁰ <input type="radio"/>	²¹ <input type="radio"/>	²² <input type="radio"/>	²³ <input type="radio"/>	²⁴ <input type="radio"/>
¹⁹ <input type="radio"/>	²⁰ <input type="radio"/>	²¹ <input type="radio"/>	²² <input type="radio"/>	²³ <input type="radio"/>	²⁴ <input type="radio"/>		
e) There is little I can do to change many of the important things in my life	<table style="width: 100%; text-align: center;"> <tr> <td>²⁵ <input type="radio"/></td> <td>²⁶ <input type="radio"/></td> <td>²⁷ <input type="radio"/></td> <td>²⁸ <input type="radio"/></td> <td>²⁹ <input type="radio"/></td> <td>³⁰ <input type="radio"/></td> </tr> </table>	²⁵ <input type="radio"/>	²⁶ <input type="radio"/>	²⁷ <input type="radio"/>	²⁸ <input type="radio"/>	²⁹ <input type="radio"/>	³⁰ <input type="radio"/>
²⁵ <input type="radio"/>	²⁶ <input type="radio"/>	²⁷ <input type="radio"/>	²⁸ <input type="radio"/>	²⁹ <input type="radio"/>	³⁰ <input type="radio"/>		
f) I can do just about anything I set my mind to	<table style="width: 100%; text-align: center;"> <tr> <td>³¹ <input type="radio"/></td> <td>³² <input type="radio"/></td> <td>³³ <input type="radio"/></td> <td>³⁴ <input type="radio"/></td> <td>³⁵ <input type="radio"/></td> <td>³⁶ <input type="radio"/></td> </tr> </table>	³¹ <input type="radio"/>	³² <input type="radio"/>	³³ <input type="radio"/>	³⁴ <input type="radio"/>	³⁵ <input type="radio"/>	³⁶ <input type="radio"/>
³¹ <input type="radio"/>	³² <input type="radio"/>	³³ <input type="radio"/>	³⁴ <input type="radio"/>	³⁵ <input type="radio"/>	³⁶ <input type="radio"/>		
g) There is really no way I can solve some of the problems I have	<table style="width: 100%; text-align: center;"> <tr> <td>³⁷ <input type="radio"/></td> <td>³⁸ <input type="radio"/></td> <td>³⁹ <input type="radio"/></td> <td>⁴⁰ <input type="radio"/></td> <td>⁴¹ <input type="radio"/></td> <td>⁴² <input type="radio"/></td> </tr> </table>	³⁷ <input type="radio"/>	³⁸ <input type="radio"/>	³⁹ <input type="radio"/>	⁴⁰ <input type="radio"/>	⁴¹ <input type="radio"/>	⁴² <input type="radio"/>
³⁷ <input type="radio"/>	³⁸ <input type="radio"/>	³⁹ <input type="radio"/>	⁴⁰ <input type="radio"/>	⁴¹ <input type="radio"/>	⁴² <input type="radio"/>		

F43.

The following statements are about families and family relationships. For each one, please indicate which response best describes your family: strongly agree, agree, disagree, or strongly disagree.

	strongly agree	agree	disagree	strongly disagree	DK	Ref
a) Planning family activities is difficult because we misunderstand each other	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>	06 <input type="radio"/>
b) In times of crisis we can turn to each other for support	07 <input type="radio"/>	08 <input type="radio"/>	09 <input type="radio"/>	10 <input type="radio"/>	11 <input type="radio"/>	12 <input type="radio"/>
c) We cannot talk to each other about the sadness we feel	13 <input type="radio"/>	14 <input type="radio"/>	15 <input type="radio"/>	16 <input type="radio"/>	17 <input type="radio"/>	18 <input type="radio"/>
d) Individuals (in the family) are accepted for what they are	19 <input type="radio"/>	20 <input type="radio"/>	21 <input type="radio"/>	22 <input type="radio"/>	23 <input type="radio"/>	24 <input type="radio"/>
e) We avoid discussing our fears or concerns	25 <input type="radio"/>	26 <input type="radio"/>	27 <input type="radio"/>	28 <input type="radio"/>	29 <input type="radio"/>	30 <input type="radio"/>
f) We express feelings to each other	31 <input type="radio"/>	32 <input type="radio"/>	33 <input type="radio"/>	34 <input type="radio"/>	35 <input type="radio"/>	36 <input type="radio"/>
g) There are a lot of bad feelings in our family	37 <input type="radio"/>	38 <input type="radio"/>	39 <input type="radio"/>	40 <input type="radio"/>	41 <input type="radio"/>	42 <input type="radio"/>
h) We feel accepted for what we are	43 <input type="radio"/>	44 <input type="radio"/>	45 <input type="radio"/>	46 <input type="radio"/>	47 <input type="radio"/>	48 <input type="radio"/>
i) Making decisions is a problem for our family	49 <input type="radio"/>	50 <input type="radio"/>	51 <input type="radio"/>	52 <input type="radio"/>	53 <input type="radio"/>	54 <input type="radio"/>
j) We are able to make decisions about how to solve problems	55 <input type="radio"/>	56 <input type="radio"/>	57 <input type="radio"/>	58 <input type="radio"/>	59 <input type="radio"/>	60 <input type="radio"/>
k) We don't get along well together	61 <input type="radio"/>	62 <input type="radio"/>	63 <input type="radio"/>	64 <input type="radio"/>	65 <input type="radio"/>	66 <input type="radio"/>
l) We confide in each other	67 <input type="radio"/>	68 <input type="radio"/>	69 <input type="radio"/>	70 <input type="radio"/>	71 <input type="radio"/>	72 <input type="radio"/>

TIME STOP

Hour Minute

--	--	--	--

(24 hour clock)

SECTION G: Contacts for follow-up

INTERVIEWER: Transcribe from front page

4	9	2	7						
---	---	---	---	--	--	--	--	--	--

Project Number

--	--	--

Program Number

--	--	--

Sequencial Family Number

G1.

The (name of CAPC program) is going to repeat this survey during the next year, and we will want to contact you again.

In case you move or change telephone numbers, it would be helpful if you could provide the name of someone, such as a friend or relative, who could help us contact you.

I want to emphasize that we will contact this person only if you move, and then only to obtain your new address or telephone number.

Given Name: Family Name: Relationship to respondent: Address:

Street address/rural route

City/Town

province

Telephone No.

SECTION H: Interviewer's Notes

H1. Was this interview conducted on the telephone or in person?

¹ ☐ on telephone → Go to Question H3

² ☐ in person] → Go to Question H2

³ ☐ both
(please specify): _____

H2. Record location of interview:

⁴ ☐ respondent's home

⁵ ☐ program site

⁶ ☐ somewhere else

H3. Record language of interview:

⁰¹ ☐ English

⁰² ☐ French

⁰³ ☐ Other (specify): _____

H4. Was any other person (adult or child) present during this interview?

⁰⁴ ☐ no

⁰⁵ ☐ yes, but did not contribute any information

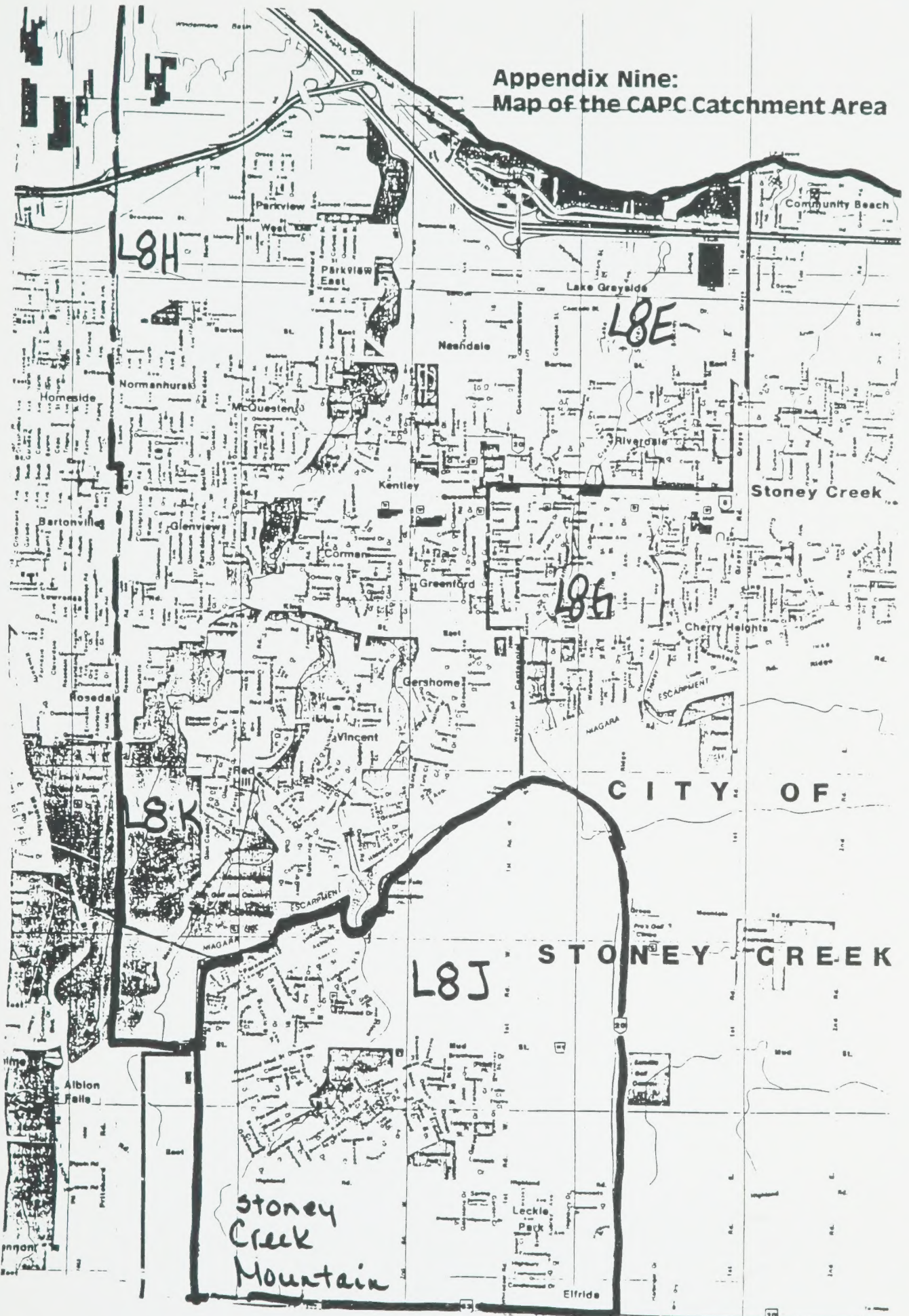
⁰⁶ ☐ yes, provided language interpretation or translation assistance only

⁰⁷ ☐ yes, and influenced the respondent's answers to a number of questions

Comments

APPENDIX NINE
MAP OF CAPC CATCHMENT AREA

Appendix Nine: Map of the CAPC Catchment Area



CAPC Boundaries

East Boundary - Fifty Road
West Boundary - Strathearn Ave. & Cochrane Road
North Boundary - to the Lake

Stoney Creek Mountain

East Boundary - Centennial Parkway (Hwy. #20)
West Boundary - Upper Mount Albion Road

CAPC Boundaries



3 2022 17292169 0